

**MEPS HC-002:
1996 Panel
Round 1 Parent Identifiers and HMO Data/
Round 2 Health Status and Access to Care Data

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**Agency for Health Care Policy and Research
Center for Cost and Financing Studies
2101 East Jefferson Street, Suite 501
Rockville, MD 20852
(301) 594-1406**

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A. Data Use Agreement

Individual identifiers have been removed from the micro-data contained in these data files. Nevertheless, under sections 308 (d) and 903 (c) of the Public Health Service Act (42 U.S.C. 242m and 42 U.S.C. 299 a-1), data collected by the Agency for Health Care Policy and Research (AHCPR) and /or the National Center for Health Statistics (NCHS) may not be used for any purpose other than for the purpose for which it was supplied; any effort to determine the identity of any reported persons or establishments, is prohibited by law.

Therefore in accordance with the above referenced Federal Statute, it is understood that:

1. No one is to use the data in this data set in any way except for statistical reporting and analysis; and
2. If the identity of any person or establishment should be discovered inadvertently, then (a) no use will be made of this knowledge, (b) The Director Office of Management AHCPR will be advised of this incident, (c) the information that would identify any individual or establishment will be safeguarded or destroyed, as requested by AHCPR, and (d) no one else will be informed of the discovered identity.
3. No one will attempt to link this data set with individually identifiable records from any data sets other than Medical Expenditure Panel Survey or the National Health Interview Survey.

By using this data you signify your agreement to comply with the above stated statutorily based requirements with the knowledge that deliberately making a false statement in any matter within the jurisdiction of any department or agency of the Federal Government violates 18 U.S.C. 1001 and is punishable by a fine of up to \$10,000 or up to 5 years in prison.

The Agency for Health Care Policy and Research requests that users cite AHCPR and the Medical Expenditure Panel Survey as the data source in any publications or research based upon these data.

B. Background

This documentation describes one in a series of public use files from the Medical Expenditure Panel Survey Household Component (MEPS HC). The survey provides a new and extensive data set on the use of health services and health care in the United States.

The MEPS HC is the third in a series of national probability surveys conducted by AHCPR on the financing and utilization of medical care in the United States. The National Medical Care Expenditure Survey (NMCES, also known as NMES-1) was conducted in 1977, the National Medical Expenditure Survey (NMES-2) in 1987. Beginning in 1996, the MEPS HC continues this series with design enhancements and efficiencies that provide a more current data resource to capture the changing dynamics of the health care delivery and insurance system.

The design efficiencies incorporated into the MEPS HC are in accordance with the Department of Health and Human Services (DHHS) Survey Integration Plan of June 1995, which focused on consolidating the Department's surveys, achieving cost efficiencies, reducing respondent burden, and enhancing analytical capacities. To accommodate these goals, new design features in the current MEPS HC include linkage with the National Health Interview Survey (NHIS), from which the sampling frame for the MEPS HC is drawn, and a change to continuous longitudinal data collection for core survey components. The MEPS HC augments the NHIS by continuing to collect data on a subset of NHIS respondents and links this information to data collected from the respondents' medical providers, employers, and insurance providers.

The Medical Expenditure Panel Survey Household Component (MEPS HC) is conducted to provide nationally representative estimates of health care utilization, expenditures, sources of payment, and insurance coverage for the U.S. civilian noninstitutionalized population. The MEPS HC also includes a nationally representative survey of nursing homes and their residents, as well as medical providers and establishments. The MEPS HC is co-sponsored by the Agency for Health Care Policy and Research (AHCPR) and the National Center for Health Statistics (NCHS).

The MEPS comprises four component surveys: the Household Component (HC), the Medical Provider Component (MPC), the Insurance Component (IC), and the Nursing Home Component (NHC). The HC serves as the core survey from which the MPC sample and part of the IC sample are based. These are supplemented by the NHC. Together these surveys yield comprehensive data that provide national estimates of the level and distribution of health care use and expenditures, support health services research, and assess health care policy implications.

1. Household Component

The MEPS HC is a nationally representative survey of the U.S. civilian noninstitutionalized population which collects medical expenditure data at both the person and household levels. The focus of the MEPS HC is to collect detailed data on demographic characteristics, health

conditions, health status, use of medical care services, charges and payments, access to care, satisfaction with care, health insurance coverage, income, and employment.

The MEPS HC collects data through an overlapping panel design. In this design, data are collected through a preliminary contact followed by a series of five rounds of interviews over a two-and-a-half year period. Two calendar years of medical expenditures and utilization are collected from each household and are captured using computer-assisted personal interviewing (CAPI) technology. This series of data collection rounds is launched again each subsequent year on a new sample of households to provide overlapping panels of survey data, which when combined with other ongoing panels will provide continuous and current estimates of health care expenditures.

The sampling frame for the MEPS HC is drawn from respondents to the NHIS, conducted by the NCHS. The NHIS provides a nationally representative sample of the U.S. civilian non-institutionalized population and reflects an oversampling of Hispanics and blacks. A subsample of 10,500 households was drawn from the NHIS sampling frame for the initial 1996 MEPS HC panel. Every five years the MEPS HC sample size is increased and targets oversampling of policy-relevant population subgroups, beginning with the 1997 panel. Initially these subgroups will include: 1) adults with functional impairments; 2) children with limitations; 3) individuals between the ages of 18-64 predicted to have high levels of medical expenditures; and 4) individuals with family incomes less than 200 percent of the poverty level.

2. Medical Provider Component

To supplement and validate information on medical care events reported in the MEPS HC, the MPC of the MEPS contacts those medical providers identified by MEPS household respondents. The MEPS MPC sample includes all reported hospitals, hospital physicians, home health agencies, and pharmacies. Also included in the MPC are all office-based physicians providing care for HC respondents receiving Medicaid, office-based physicians associated with a 75 percent sample of households receiving care through an HMO or managed care plan, and a 25 percent sample of remaining households.

The 1996 sample is projected to provide data from approximately 3,500 hospitals, 8,400 office-based physicians, 8,500 separately billing doctors, and 500 home health providers. Data are collected in the MPC on medical and financial characteristics of medical events reported by HC respondents, including diagnoses (ICD-9s and DSM-IVs), physician procedure codes (CPT-4s), inpatient stay codes (DRGs), charges, payments, and the reasons for any difference between charges and payments. The MPC is conducted through telephone interviews and mailed survey materials.

3. Insurance Component

The MEPS IC collects data on health insurance plans obtained through employers, unions, or other private health insurance sources. Data obtained in the MEPS IC include the number and types of private insurance plans offered, benefits associated with these plans, premiums, contributions by employer vs. employee, eligibility requirements, and employer characteristics.

Establishments participating in the MEPS IC are selected through four sampling frames: 1) a list of employers or other insurance providers identified by respondents in the MEPS HC who report having private health insurance at the Round 1 interview; 2) a Census Bureau list frame of private sector business establishments; 3) the Census Bureau's Census of Governments; and 4) an Internal Revenue Service list of the self-employed.

To provide an integrated picture of health insurance, data collected from the first sampling frame (i.e., employers and insurance providers) are linked back to data provided by the HC respondents. Data from the other three sampling frames are collected to provide annual national and state estimates on the supply of private health insurance available to American workers and to evaluate policy issues pertaining to health insurance.

Designed as an annual panel survey, each year the MEPS IC sample includes approximately 7,000 establishments identified through the MEPS HC, 27,000 identified through the business establishments list frame, 1,900 governments from the Census of Governments, and 1,000 self-employed persons. Data are collected from the selected organizations through a prescreening telephone interview, a mailed questionnaire, and a nonresponse telephone follow up.

4. Nursing Home Component

The 1996 NHC of the MEPS is a survey of nursing homes and persons resident in or admitted to nursing homes at any time during calendar year 1996. The MEPS NHC gathers information on the demographic characteristics, residence history, health and functional status, use of services, use of prescription medications, and health care expenditures of nursing home residents. Nursing home administrators and designated staff also provide information on facility size, ownership, certification status, services provided, revenues and expenses, and other facility characteristics. A community questionnaire obtains data from next of kin or other knowledgeable persons in the community on income, assets, family relationships, and care-giving information for the sampled nursing home resident. Under the DHHS Survey Integration Plan, the MEPS NHC is designed to be conducted every five years.

The 1996 NHC sample was selected using a two-stage stratified probability design. The first stage was used to select facilities; the second stage sampled facility residents, selecting from both persons in residence on January 1, 1996, and those admitted between January 1 and December 31, 1996. The sample frame for facilities was derived from the National Health Provider Inventory, which is updated periodically by NCHS. MEPS NHC data were collected in person in three

rounds of data collection using the CAPI system over a year-and-a-half period. Community data were collected by telephone using computer-assisted survey interviewing (CASI) technology. At the end of data collection, the sample will consist of approximately 800 responding facilities, 3,100 January 1 residents, and approximately 2,200 eligible admissions.

5. Survey Management

MEPS data are collected under the authority of the Public Health Service Act and are being edited and published in accordance with the confidentiality provisions within this act and those of the Privacy Act. Consultation and technical assistance are received from the NCHS.

Data collection is conducted under contract by Westat, Inc., Rockville, MD; the National Opinion Research Center at the University of Chicago; and through an interagency agreement with Bureau of the Census. Technical consultation is provided by Medstat, Inc., Boston, MA. Data processing support is provided under contract by Social & Scientific Systems, Inc., Bethesda, MD.

As soon as data collection and editing are completed, the MEPS survey data are released to the public in staged releases of summary reports and micro data files. Summary reports are made available as hard copy documents and as electronic files. Micro data files are released on CD-ROM and/or electronic files. Hard copy documents and CD-ROMs will be available free of charge through the AHCPR Publications Clearinghouse at 1-(800) 358-9295, or can be purchased from the National Technical Information Services (NTIS) at (703) 487-4650. The mailing address is 5285 Port Royal Road, Springfield, VA, 22161. If calling from outside the U.S., dial (410) 381-3150. Selected electronic files will be available on the Internet in the MEPS section of the AHCPR home page: <http://www.ahcpr.gov>.

Additional information on MEPS is available from the MEPS project manager or the MEPS public use data manager at the Center for Cost and Financing Studies, Agency for Health Care Policy and Research, 2101 East Jefferson Street, Suite 500, Rockville, MD 20852 (301/594-1406).

C. Technical and Programming Information

1. General Information

This documentation describes the second release of public use data from the 1996 Medical Expenditure Panel Survey Household Component (MEPS HC). Released as ASCII files (with related SAS programming statements), these public use files provide information collected on a nationally representative sample of the civilian non-institutionalized population of the United States during 1996. There are 2 files contained in this release:

File 1: Contains data collected in Round 1 of the MEPS HC describing parent identifiers and HMO enrollment

File 2: Contains data collected in Round 2 of the MEPS HC describing health status and access to care

These data are being released prior to final data cleaning and editing in order to provide the research and policy community prompt access to MEPS HC data. Analysts should consider these data as preliminary as they have not been subject to the same level of quality control procedures which are usually performed on products of this type.

This second release of MEPS HC data (including the data files, document file and the file containing SAS programming statements) can be obtained from either of the following sources:

1. From the Internet, as downloadable files from the MEPS section of the AHCPR home page: <http://www.ahcpr.gov>.
2. From the AHCPR Publications Clearinghouse (1-800-358-9295), which provides these data on diskettes. When ordering, please reference "MEPS HC-002: 1996 Panel Round 1 Parent Identifiers and HMO Data/Round 2 Health Status and Access to Care Data, October 1997", AHCPR Clearinghouse Number: 98-DP01.

The following documentation offers a brief overview of the types and levels of data provided, the content and structure of the files and the codebook, and programming information. It contains the following sections:

Data File Information
Survey Sample Information
Programming Information
Codebooks
Crosswalk of Variables to Variable Source

Detailed information on sample design and data collection methods can be found in:

Cohen J. Design and methods of the Medical Expenditure Panel Survey Household Component. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Methodology Report No. 1*. AHCPR Pub. No. 97-0026.

Cohen S. Sample design of the 1996 Medical Expenditure Panel Survey Household Component. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Methodology Report No. 2*. AHCPR Pub. No. 97-0027.

A complete set of Rounds 1 through 3 MEPS HC instruments, as well as copies of the above-mentioned reports, are available as downloadable files on the Internet in the MEPS section of the AHCPR home page. The Round 1 data collection instruments are also available on diskette from the AHCPR Publications Clearinghouse, as part of the product: "Medical Expenditure Panel Survey Household Component Round 1 Questionnaire" (AHCPR Clearinghouse Number 97-DP02). (The Round 2 data collection instruments relevant to File 2 of MEPS HC-002 are also available from the Clearinghouse on diskette, as part of product number 98-DP01, described above.)

A catalog of all MEPS products released to date is provided in Section F of this document.

2. Data File Information

File 1 is a person-level file containing data for a total of 24,676 persons from Round 1 of the Household Component of the 1996 Panel of the Medical Panel Expenditure Survey. This count includes all household survey respondents who resided in eligible responding households. Of these persons, 23,612 were assigned a positive person level weight. For each variable, both weighted and unweighted frequencies are provided. In conjunction with the weight variable (WGTSPI) provided on this file, data for these persons can be used to make estimates for the civilian noninstitutionalized U. S. population as of the first half of 1996. The data in File 1 are provided to supplement the capacity of the first MEPS HC data release (HC-001). Information on producing national estimates with appropriate weights is included in the documentation for that file. The Round 1 weights and variance estimation variables are provided on this file as a convenience to the user.

File 2 is a person-level file containing data for a total of 23,767 persons from Round 2 of the Household Component of the 1996 Panel of the Medical Panel Expenditure Survey. This count includes all household survey respondents who resided in eligible responding households. Of these persons, 22,149 were assigned a positive person level weight. For estimation purposes, the target population for the Access to Care and Round 2 Health Status estimates is specified as a cohort. This cohort represents the subset of the U.S. civilian noninstitutionalized population defined as of the first half of 1996, who were alive and retained this classification in the second half of the year (e.g., excludes deaths and institutionalization in the second half of the year). The estimated population total for the U.S. civilian noninstitutionalized population as of the first half

of 1996 is 263,515,813, derived as a sum of the estimation weight, WGTSP2T, across all persons on the file. The estimated population total that defines the cohort is 262,654,184. Details on the derivation of national person level estimates for this population cohort are given in section 3.2.2 (Estimation Issues). For each variable, both weighted and unweighted frequencies are provided. Using the weight variable WGTSP2T provided on this file, and further subsetting the file as specified in section 3.2.2, the data on this file can be used to make estimates for the subset of the civilian noninstitutionalized U.S. population as of the first half of 1996, who were alive and retained this classification in the second half of the year.

All MEPS HC public use data sets can be linked using the sample person identifier (DUPERSID). Both File 1 and File 2 on this release are designed to be linked to the first MEPS public use data release (available on CD-ROM from the AHCPR Clearinghouse as product "MEPS HC-001: 1996 Panel Round 1 Population Characteristics March 1997"; Clearinghouse Number 97-DP20. The HC-001 documentation, including codebook, is also available as a downloadable file in the MEPS section of the AHCPR home page).

2.1 Codebook Structure

A codebook is provided for each data file, and contains variables in the same sequence as on the corresponding data file, which is as follows:

File 1:

- Survey administration variables
- Parent identifiers
- Managed care variables
- Weight and variance estimation variables

File 2:

- Survey administration variables
- Health status variables
- Access to care variables
- Weight and variance estimation variables

2.2 Reserved Codes

In both codebooks, the following reserved code values are used:

VALUE	DEFINITION
-1 INAPPLICABLE	Question was not asked due to skip pattern

-7 REFUSED	Question was asked and respondent refused to answer question.
-8 DK	Question was asked and respondent did not know answer
-9 NOT ASCERTAINED	Interviewer did not record the data

2.3 Codebook Format

Each codebook describes an ASCII data set and provides the following programing identifiers for each variable:

IDENTIFIER	DESCRIPTION
Name	Variable name (maximum of 8 characters)
Description	Variable descriptor (maximum 40 characters)
Format	Number of bytes
Type	Type of data: numeric (indicated by NUM) or character (indicated by CHAR)
Start	Beginning column position of variable in record
End	Ending column position of variable in record
Question Number	Denotes variable source

2.4 Variable Naming

In general, variable names reflect the content of the variable, with an 8 character limitation. Edited variables end in an X, and are so noted in the variable label. Variables contained in this delivery were derived either from the questionnaire itself or from the CAPI. For variables coming directly from one question, the question number is shown in the "Question Number" column in the codebook. Variables which were constructed from multiple questions are indicated by "CONSTRUCTED" in the Question Number column, and the question numbers can be found in Section E - Crosswalk of Variables to Variable Source. Variables which were derived from CAPI have no corresponding question number, and have "NA" in the Question Number column.

2.5 Contents of Data Files

This section describes the contents of each of the 2 files contained in this MEPS HC public data release

2.5.1 Contents of File 1

File 1 contains survey administration variables, and data collected in these sections of the Round 1 HC questionnaire: Reenumeration (RE), Health Insurance (HX) and Managed Care (MC). The file also contains weight and variance estimation variables, which are described in Section 3.

2.5.1.1 Survey Administration Variables

The survey administration variables provided on File 1 are the dwelling unit and person identifiers (DUID, PID and DUPERSID), which are described below as part of the survey administration variables provided on File 2. Other Round 1 HC survey administration variables related to eligibility and response were previously released for the File 1 population in the first HC public use file (HC-001). As described above, this data file is available through the AHCPR Clearinghouse, along with relevant documentation (and SAS programming statements), and can be linked to File 1 using the identifier DUPERSID.

2.5.1.2 Parent Identifiers

The File 1 variables MOMPID1X and DADPID1X identify the parents of the person represented on that File 1 record. MOMPID1X contains the person identifier (PID) for each individual's mother if she lived in the dwelling unit in Round 1 of the survey, or a value of -1 INAPPLICABLE if she did not. Similarly, DADPID1X contains the person identifier (PID) for each individual's father if he lived in the dwelling unit during Round 1 of the survey, or a value of -1 INAPPLICABLE if he did not. MOMPID1X and DADPID1X were constructed based on information collected in the relationship grid in the Round 1 instrument at question RE76 and include biological, adopted, and step parents. Extensive editing was carried out so that MOMPID1X and DADPID1X are consistent with each individual's age, sex, and other relationships within the family unit. For a small number of cases with missing data, MOMPID1X and/or DADPID1X have values of -9.

2.5.1.3 HMO Enrollment Variables

The File 1 variables PRVHMO1, MCRHMO1, and PUBHMO1 are constructed variables identifying enrollment in HMOs. The variable PRVHMO1 was constructed for each person in the Round 1 File with private insurance coverage. PRVHMO1 identifies enrollment in any HMO health plan from any private source of insurance. Similarly, MCRHMO1 was constructed for

each person in the Round 1 file with Medicare coverage and identifies enrollment in a Medicare HMO. Note that HMO enrollment through a Medicare supplemental, or Medigap plan, is accounted for by PRVHMO1, rather than MCRHMO1. PUBHMO1 is also constructed for each person in the Round 1 file who is covered by Medicaid or by other public hospital/physician coverage. PUBHMO1 identifies enrollment in a Medicaid HMO, in a Medicaid primary care case management program, or in an HMO sponsored by some other public hospital/physician insurance program. Persons with more than one source of insurance have more than one HMO enrollment variable constructed.

Note that the MEPS HC instrument does not allow identification of HMO enrollment for persons covered by CHAMPUS.

HMO enrollment is identified in several different ways depending on the source of insurance coverage, as explained in more detail below. For each of these three variables, HMO plans are identified by household respondents. An additional component of the MEPS project, the MEPS Insurance Component (MEPS IC) also provides information on HMO enrollment status through a follow back survey of the employers and insurers of MEPS household respondents and information based on the abstraction of data from policy booklets. These data will be available at a later date.

Private Insurance

If a person is covered by private insurance, then the variable PRVHMO1 is set to “yes” if any of the following conditions are met:

- (1) If the insurance plan was purchased directly through an HMO (HX03, HX23); or
- (2) If the plan was identified as being purchased from an insurance company which was an HMO (HX49, HX51, HX54); or
- (3) If a response of “yes” was recorded for the plan on the following question (MC01):

Now I will ask you a few questions about how (POLICYHOLDER)’s health insurance through (ESTABLISHMENT) works for non-emergency care. We are interested in knowing if (POLICYHOLDER)’s (ESTABLISHMENT) plan is an HMO, that is, a Health Maintenance Organization. With an HMO, you must generally receive care from HMO physicians. For other doctors, the expense is not covered unless you were referred by the HMO or there was a medical emergency. Is (POLICYHOLDER)’s (INSURER NAME) an HMO?; or

- (4) If a response of “yes” was recorded for the plan on the following question (MC02):

(Do/Does) (POLICYHOLDER)'s insurance plan require (POLICYHOLDER) to sign up with a certain primary care doctor, group of doctors, or a certain clinic which (POLICYHOLDER) must go to for all of (POLICYHOLDER)'s routine care?

Probe: Do not include emergency care or care from a specialist you were referred to.

If a person is covered by more than one plan or source of private insurance then PRVHMO1 is coded "yes" if any of the plans are identified as HMO plans. PRVHMO1 is set to "no" when the person was not enrolled in an HMO and also when it was not possible to ascertain HMO enrollment status. PRVHMO1 is set to "inapplicable" for persons who are not covered by private insurance.

Medicare

If a person receives coverage from Medicare, then MCRHMO1 was coded "yes" if they identified their plan from a list shown to them of Medicare HMOs in their area or if they answered "yes" to either of the following questions (HX32, HX32A):

- (1) Now I will ask you a question about how (PERSON)'s Medicare works for non-emergency care. (When answering this question, please include only insurance from Medicare, not any privately purchased insurance.)

(Are/Is) (PERSON) signed up with an HMO, that is a Health Maintenance Organization? With an HMO, you generally receive care from HMO physicians.

- (2) Does Medicare require (PERSON) to sign up with a certain primary care doctor, group of doctors, or with a certain clinic which they must go to for all of their routine care?

MCRHMO1 is set to "no" when the person is not enrolled in an HMO and also when it is not possible to ascertain HMO enrollment status. MCRHMO1 is set to "inapplicable" for persons who are not covered by Medicare.

Medicaid

If a person is covered by Medicaid or by some other public program that provides hospital/physician insurance coverage, then PUBHMO1 is set to "yes" if the person picks their plan from a list shown to them of Medicaid HMOs in the area or if they answer "yes" to either of the following questions:

- (1) Under {{Medicaid/{STATE NAME FOR MEDICAID}}}/the program sponsored by a state or local government agency which provides hospital and physician benefits} (are/is)

(READ NAME(S) FROM BELOW) signed up with an HMO, that is a Health Maintenance Organization?

With an HMO, you must generally receive care from HMO physicians. If another doctor is seen, the expense is not covered unless you were referred by the HMO, or there was a medical emergency.

- (2) Does {{Medicaid/{STATE NAME FOR MEDICAID}}}/the program sponsored by a state or local government agency which provides hospital and physician benefits} require (READ NAME(S) FROM BELOW) to sign up with a certain primary care doctor, group of doctors, or with a certain clinic which they must go to for all of their routine care?

PROBE: Do not include emergency care or care from a specialist they were referred to.

PUBHMO1 is set to “no” when the person is not enrolled in a Medicaid or public HMO and also when it is not possible to ascertain HMO enrollment status. PUBHMO1 is set to “inapplicable” for persons who are not covered by Medicaid or other public programs.

2.5.2 Contents of File 2

File 2 contains survey administration variables, and data collected in the Condition Enumeration (CE), Health Status (HE) and Access to Care (AC) sections of the HC Round 2 questionnaire. The file also contains weight and variance estimation variables, which are described in Section 3.

2.5.2.1 Survey Administration Variables

The File 2 survey administration variables (DUID through INSCOPE2) contain information related to family composition and person-level status codes. Data for the survey administration variables were derived from the sampling process, the CAPI programs, or were computed based on information provided by the respondent in the re-enumeration section of the questionnaire.

Detailed information on the sampling process is found in Section 3 and in Cohen S. Sample design of the 1996 Medical Expenditure Panel Survey Household Component. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Methodology Report No. 2*. AHCPR Pub. No. 97-0027.

Dwelling Units, Families, and Persons

The definitions of Dwelling Units (DUs) and Group Quarters in the MEPS Household Component are generally consistent with the definitions employed for the National Health Interview Survey. The dwelling unit ID (DUID) is a five-digit random ID number assigned after the case was sampled for MEPS HC. The person number (PID) uniquely identifies all persons

within a DUID. The variable DUPERSID is the person identifier (i.e., the File 2 unique record identifier) which is the concatenation of the variables DUID and PID. The variable FAMID2 identifies a family (i.e. persons related to one another by blood, marriage, adoption or foster care), within a DUID.

Reference Person Identifier

A reference person is defined as the person who owns or rents the home in which the family lives. The reference person for the Round 2 interview is identified by RND2REF, which contains the reference person's PID value. Only one reference person is identified for each FAMID2.

Person Status

The variables KEYNESS2, ELIGRND2, and INSCOPE2 describe the overall status of each person for the Round 2 data collection. These variables are set based on sampling information and responses provided in the re-enumeration section.

Through the re-enumeration section of the Round 2 questionnaire, each member of a reporting unit (a reporting unit is a person or group of persons in a sampled dwelling unit who are related by blood, marriage, adoption, or other family association and who are interviewed as a group in MEPS HC) was classified as "key" or "non-key", "in-scope" or "out-of-scope", and "eligible" or "ineligible" for MEPS HC data collection. To be included in the set of persons used in the derivation of MEPS HC person level estimates, a person had to be a member of the civilian non-institutionalized population for some period of time in the Round 2 reference period. Because a person's eligibility for the survey might have changed since the NHIS interview, a sampling re-enumeration of household membership was conducted at the start of the MEPS HC Round 2 interview (and at the start of each subsequent interview). Only persons who were "in-scope", "key", and "eligible for data collection" in both Round 1 and Round 2 were assigned positive values of the person level weight (WGTSP2T), which are to be used in the derivation of person level national estimates for the Access to Care and Round 2 Health Status data (see Estimation Issues, section 3.2.2).

In-Scope

A person was classified as in-scope (INSCOPE2=1) if he or she was a member of the U.S. civilian, non-institutionalized population at some time during the Round 2 reference period.

Keyness

The variable KEYNESS2 indicates the person's key status in Round 2. The term "keyness" is related to an individual's chance of being included in MEPS HC. A person is key if that person is appropriately linked to the set of 1995 NHIS sampled households designated for inclusion in

MEPS HC. Specifically, a key person either was a member of an NHIS household at the time of the NHIS interview, or became a member of such a household after being out-of-scope prior to joining that household (examples of the latter situation include newborns and persons returning from military service, an institution, or living outside the United States.).

A non-key person is one whose chance of selection for the NHIS (and MEPS HC) was associated with a household eligible but not sampled for the NHIS, who happened to have become a member of a MEPS HC reporting unit by the time of the MEPS HC Round 2 interview. MEPS HC data, (e.g., utilization and income) were collected for the period of time a non-key person was part of the sampled unit to permit family level analyses. However, non-key persons who leave a sample household would not be recontacted for subsequent interviews. Non-key individuals are not part of the target sample used to obtain person level national estimates.

It should be pointed out that a person may be key even though not part of the civilian, non-institutionalized portion of the U.S. population. For example, a person in the military may be living with his or her civilian spouse and children in a household sampled for the 1995 NHIS. The person in the military would be considered a key person for MEPS HC. However, such a person would not receive a person-level sample weight so long as he or she was in the military. All key persons who were eligible and participated in both Round 1 and Round 2 of the 1996 MEPS HC received a positive person level sample weight except those who were in the military.

Eligibility

The variable indicating "eligibility" is ELIGRND2, where 1 is coded for persons eligible for data collection for at least a portion of the Round 2 reference period, and 2 is coded for persons not eligible for data collection at any time during the second round reference period. The eligibility of a person for MEPS HC pertains to whether or not data were to be collected for that person. All key, in-scope persons of a sampled RU were eligible for data collection. The only non-key persons eligible for data collection were those who happened to be living in the same RU as one or more key persons, and their eligibility continued only for the time that they were living with a key and in-scope person. The only out-of-scope persons eligible for data collection were those who were living with key in-scope persons, again only for the time they were living with a key person. Only military persons meet this description. A person was considered eligible if they were eligible at any time during Round 2.

Implications of these Characterizations of Sampled Persons for the File 2 Weights

Positive values of WGTSP2T were specified for responding persons who were in both Rounds 1 and 2 and were key, eligible, and in-scope.

Persons who were non-key and/or out-of-scope but who were eligible for data collection and were part of a responding family (reporting unit) are considered part of the family for analytic

purposes and have an associated family level weight. In a small number of these cases, there are missing data. Future data releases will contain imputed data for these cases.

Thus, persons in the military who are members of an RU will have received a family level weight but not a positive value of a person level weight. Persons who join an RU who were previously in-scope and thus had their chance for participation in MEPS HC associated with a household not selected for the 1995 NHIS (i.e., non-key) also will have received a family level weight but not a positive value for a person level weight. Persons who joined an RU as civilians and who were out-of-scope prior to joining the RU and thus did not have a chance for selection for the 1995 NHIS will have received both a family level weight and a person level weight.

Weights and variance estimation variables and estimation issues are discussed further in Section 3.

2.5.2.2 Health Status Variables

The File 2 Health Status variables are HSELIG2 through WEIGHTOZ. Edits to these variables involved the construction of person level variables based on information collected in the Condition Enumeration and Health Status sections of the HC questionnaire. Most of the Health Status questions asked in Round 2 were asked at the person level and were directed toward ascertaining the health status of children in the family. Some of the Health Status variables were initially asked at the family level to ascertain if anyone in the household had a particular problem or limitation. These were followed by questions to determine which household member had each problem or limitation. All information ascertained at the family level has been brought to the person level for this file. Inapplicable cases were those where a question was never asked because of a skip pattern in the survey (e.g., individuals who were over age 6 were not asked about immunizations). The variable HSELIG2 indicates whether persons were eligible to receive the Round 2 Health Status questions; persons with HSELIG2=2 should be excluded from Round 2 Health Status estimates.

Not all variables or categories that appear in the Health Status section of the HC are included on this file, as some small cell sizes were suppressed to maintain respondent confidentiality. This affects the following questions:

HE44: Categories 1, 2 and 3 were combined into a single category with a value of 1 YES.

HE52B: Categories 4 and 10 were combined with other services, and appear in the variable OTHRSVCS.

Perceived Health Status and Mental Health Status

Perceived health status (RTEHLTH2) and mental health status (MNTHLTH2) were collected in the Condition Enumeration section. These questions (CE01 and CE02) asked the respondent to rate each person in the family according to the following categories: excellent, very good, good, fair, and poor. No editing was done to these variables.

IADL and ADL Help/Supervision

The Instrumental Activities of Daily Living (IADL) Help or Supervision variable (IADLHLP2) was constructed from a series of three questions. An initial screening question (HE01) asked if anyone in the family received help or supervision with IADLs such as using the telephone, paying bills, taking medications, preparing light meals, doing laundry, or going shopping. If the response to HE01 was “yes,” a follow-up question (HE02) was asked to determine which household member received help or supervision. For persons under age 13, a final verification (HE03) was asked to confirm that the IADL help or supervision was the result of an impairment or physical or mental health problem. If the response to the final verification question was “no,” IADLHLP2 was coded as “no” for persons under the age of 13.

If the respondent answered “no” to the IADL screening question (HE01), all members of the family were coded as receiving no IADL help or supervision. In cases where the response to the family level question was “don’t know,” “refused,” or otherwise missing, all persons were coded according to the family level response. In cases where the response to the family level question (HE01) was “yes” but no specific individuals were identified in the follow-up question as having IADL difficulties, all persons were coded as “don’t know.” In cases where one or more family members received such help or supervision, those members were coded “yes” on IADLHLP2 and all remaining family members were coded “no.”

The Activities of Daily Living (ADL) Help or Supervision variable (ADLHLP2) was constructed in the same manner as IADLHLP2, but using questions HE04-HE06, to ask about help or supervision with ADLs, including bathing, dressing or getting around the house.

Play Limitations (Children age 4 and under)

The variable LIMTACT, indicating limitation in activities for children ages 0 through 4, was constructed using questions HE40 and HE41. The initial question (HE40) determined if any child ages 4 or under in the family was limited in any way, including play activity, because of an impairment or physical or mental health problem. If the response was “yes,” the follow up question determined which child should be coded “yes.” If there were other children ages 4 or under in the family who were not identified as having limitations, they were coded “no.” If the answer to LIMTACT was “no,” all children aged four or under in the family were coded “no.” If there was an indication that a child had a limitation, but no child was identified, all children within the age category were coded “don’t know.” In cases where the response to the family level

question was “don’t know,” “refused,” or otherwise missing, all children ages 4 and under were coded according to the family level response. If a person's age (as measured by the Round 1 age variable) was greater than 4, LIMITACT was coded -1.

Other variables indicate if children aged 0 to 4 were limited in the kind or amount of play activities (PLAYLIMIT), were unable to play (CANTPLAY), or participated in special programs or early interventions (SPECPROG). If a person's age (as measured by the Round 1 age variable) was greater than 4, PLAYLIMIT, CANTPLAY, and SPECPROG were coded -1.

Immunization Variables (Children ages 0 to 6)

The immunization information was collected at the person level for children ages 0 through 6 by questions HE45 to HE49A. If age of child, as measured by the Round 1 age variable, was greater than 6, all immunization variables were coded -1. For questions about diphtheria, whooping cough and tetanus (DTP) or polio immunization (DTPSHOT, POLIOSHT) there were follow up questions which asked about the frequency of the immunization shots or drops. If the answer to DTPSHOT or POLIOSHT was “no,” “don’t know,” or “refused,” then the follow up variables NUMDTP and NUMPOLIO were coded -1.

Behavioral Problem Variables (Children ages 5 to 17)

The series of questions HE50_01 to HE50_13 represent questions about possible behavioral problems. If the age of the child (as measured by the Round 1 age variable) was less than 5 or greater than 17, the variables MOMPROB to TROUBLE were coded -1. In addition, if a respondent indicated that a certain question was inapplicable for a specific child (for example, if a child’s mother was deceased, a respondent would indicate that a question about how a child gets along with his/her mother is inapplicable) the relevant variable was coded -1.

Text Variables

There are two health status variables included in this file that are categorical representations of text fields. PROGTXT is derived from question HE52A. Persons who responded positively to question HE52, which asked about participation in special programs, were then asked in HE52A to name or describe that program. Those responses were examined and coded into the following categories:

- 1 Programs for children with learning disabilities
- 2 Programs for sensory impaired children
- 3 Programs for mentally/physically impaired children
- 4 Small Class, individualized attention, resource room
- 5 Supplemental reading and/or math help
- 6 Speech therapy program

7 Other

SPECIFLM, is derived from question HE54OV. Persons who responded positively to question HE54, which asked if a child had any other activity limitations besides school limitations, were then asked in HE54OV what those limitations were. The responses were examined and combined into categories including:

- 1 Active sports
- 2 General physical activity
- 3 Social interaction, communication or speech problem
- 4 All activities
- 5 Other (most references in this category were to specific conditions)

2.5.2.3 Access to Care Variables

The File 2 variables ACCELIG through OTHRPROB describe data from the Access to Care section of the HC questionnaire, which was administered in Round 2 of the MEPS HC. This supplement serves a number of purposes in the MEPS HC by gathering information on three main topic areas: whether each family member has a usual source of health care, the characteristics of usual source of health care providers for the family, and barriers the family has faced in obtaining needed health care. The variable ACCELIG indicates whether persons were eligible to receive the Round 2 Access to Care questions. Persons with ACCELIG=2 should be excluded from estimates made with the Round 2 Access to Care data.

Family members' usual source of health care. For each individual family member, MEPS HC ascertains whether there is a particular doctor's office, clinic, health center, or other place that the individual usually goes to if he/she is sick or needs advice about his/her health (HAVEUSC). For those family members who do not have a usual source of health care, MEPS HC ascertains the reason(s) why (YNOUSC through OTHREA04). If any family members changed their usual source of health care during the 12 months prior to the Round 2 interview, MEPS HC gathers information on the reason why this change was made (CHNGUSC through YNOMORE).

Characteristics of usual source of health care providers for the family. For each unique usual source of care provider for a given family, MEPS HC asks for information on the following characteristics of the usual source of care provider:

- is the provider a medical doctor or some other type of medical provider (followed by questions which ask either the provider's medical specialty

or the type of non-physician provider) (TYPEPERS), and is the provider hospital-based (TYPEPLCE and LOCATION);

- is the provider the person or place family members would go to for new health problems, preventive health care, and referrals to other health professionals (MINORPRB through REFFRLS);
- does the provider have office hours nights and weekends, characteristics of the provider related to appointments and waiting time, ease of contacting a medical person at the provider's office by telephone (OFFHOURS through PHONEDIF);
- a number of quality-related characteristics of the provider, including whether the provider generally listens to family members, asks about prescription medications other doctors may give them, and family members' confidence in and satisfaction with the care received from the provider (PRLISTEN through USCQUAL).

Family barriers. Finally, the Access to Care supplement gathers information on barriers to health care for the family. This includes one question that asks if any family members have recently gone without needed health care because the family needed money to buy food, clothing, or pay for housing (NOCARE). In addition, the respondent is asked to rate his/her satisfaction with the ability of family members to obtain health care if needed (HCNEEDS). A series of two questions is asked to directly assess whether any family members experienced difficulty in obtaining any type of health care, delayed obtaining care, or did not receive health care they thought they needed due to any of the following reasons (OBTAINHC through OTHRPROB):

- Financial/Insurance Problems, including couldn't afford care; insurance company wouldn't approve, cover, or pay for care; pre-existing condition; insurance required a referral, but

couldn't get one; doctor refused to accept family's insurance plan;

- Transportation Problems, including medical care was too far away; can't drive or don't have car/no public transportation available; too expensive to get there;
- Communication Problems, including hearing impairment or loss; different language;
- Physical Problems, including hard to get into building; hard to get around inside building; no appropriate equipment in office;
- Other Problems, including couldn't get time off work; didn't know where to go to get care; was refused services; couldn't get child care; didn't have time or took too long.

Editing of the Access to Care Variables

Editing of these File 2 variables consisted primarily of logical editing for consistency with skip patterns. Other editing included the construction of new variables describing the USC provider, and recoding several "other specify" text items into existing or new categorical values, which are described below.

Not all variables or categories that appear in the Access to Care section are included on File 2, as some small cell sizes have been suppressed to maintain respondent confidentiality. This affects the following questions:

AC11: Categories 1 and 2 were combined and appear in the variable TYPEPERS as 8 NURSE/NURSE PRACTITIONER

AC23: Categories 2 and 4 were combined with 91 OTHER REASON

AC26: Categories 9, 11 and 12 were combined with 91 OTHER

Constructed Variables Describing the Usual Source of Care Provider

The variables PROVTPX, TYPEPLCE, TYPEPERS and LOCATION provide information on the type and location of the usual source of care provider. These variables were constructed as follows, using one or more questionnaire items which are not included on File 2:

PROVTYPX was constructed from items in the Provider Roster Section (available as a downloadable file on the MEPS Home Page), and has the following possible values:

- 1 FACILITY
- 2 PERSON
- 3 PERSON IN FACILITY PROVIDER

Question PV01 asks whether the provider is a person or a facility. For providers designated as a person, the responses to item PV05 (which indicates if the provider is part of a group practice or HMO) and items PV03/ PV10 (which indicate the provider's address), were used to determine if the provider is a "person in facility" provider (i.e., a person for whom both person and facility characteristics are known, such as "Dr. X at Y Medical Associates") .

TYPEPERS was constructed from responses to items AC10, AC11, AC11OV, AC12 and AC12OV in the Access to Care Section and describes the type of medical provider for providers indicated as person or person in facility providers (records with PROVTYPX = 1 have a value of -1 for TYPEPERS). TYPEPERS has the following possible values:

- 1 MD- GENERAL/FAMILY PRACTICE
- 2 MD- INTERNAL MEDICINE
- 3 MD - PEDIATRICS
- 4 MD - OB/GYN
- 5 MD-SURGERY
- 6 MD - OTHER
- 7 CHIROPRACTOR
- 8 NURSE/NURSE PRACTITIONER
- 9 PHYSICIAN'S ASSISTANT
- 10 OTHER NON-MD PROVIDER
- 11 UNKNOWN

Note that the value 6 MD-OTHER includes doctors of osteopathy, as well as a small number of medical doctors whose specialty is unknown.

TYPEPLCE was constructed from responses to Access to Care items AC06 and AC07 and describes the type of place corresponding to the usual source of care provider with the following values:

- 1 HOSPITAL CLINIC OR OUTPATIENT DEPARTMENT
- 2 PRIVATE OFFICE IN HOSPITAL
- 3 HOSPITAL EMERGENCY ROOM
- 4 NON-HOSPITAL PLACE

TYPEPLCE was only constructed for cases with provider type indicated as facility or person in facility provider (records with PROVTPX=2 have a value of -1 for TYPEPLCE).

LOCATION was constructed from the variables PROVTPX and TYPEPLCE, and describes the location of the provider as either office based or hospital based, and if hospital based, as either emergency room or non-emergency room. LOCATION has the following values:

- 1 OFFICE
- 2 HOSPITAL, NOT EMERGENCY ROOM
- 3 HOSPITAL EMERGENCY ROOM

Note that all cases with PROVTPX=2 PERSON have LOCATION = 1 OFFICE.

These 4 variables in combination describe the usual source of care provider. For example, a group practice or clinic with no particular person named is coded as:
PROVTPX = 1 FACILITY, LOCATION = 1 OFFICE and TYPEPERS = -1 INAPPLICABLE.

Re-coding of Additional Other Specify Text Items

For Access to Care items AC03, AC04, AC08, AC09, AC21 and AC23, the other specify text responses were reviewed and coded as an existing or new value for the related categorical variable (for AC03, AC08, AC21 and AC23), or coded as an existing or new "yes/no" variable (for items AC04 and AC09). The following are the new codes or variables which were created from these other specify text responses.

for item AC03 - this new value was constructed for the variable YNOUSC:

- 10 OTHER INSURANCE RELATED REASON

for item AC04 - the new variable OTHINSRE was constructed for other insurance-related reasons

for item AC08 - this new value was constructed for the variable YGOTOUSC:

10 INSURANCE RELATED REASON

for item AC09 - the new variable INSREASN was constructed for insurance-related reasons

for item AC21 - these new values were constructed for the variable YCHNGUSC:

8 COST-RELATED REASON

9 OTHER INSURANCE-RELATED REASON

10 JOB RELATED REASON

11 NEW DOCTOR WAS REFERRED OR RECOMMENDED

12 OTHER COMPLAINTS ABOUT OLD DOCTOR

13 TRANSPORTATION REASON

for item AC23 - these new values were constructed for the variable YNOMORE:

8 COST-RELATED REASON

9 SELDOM OR NEVER SICK/NO NEED FOR DOCTOR

10 OTHER INSURANCE-RELATED REASON

3. Survey Sample Information

3.1 Sample Design and Response Rates

The MEPS HC is designed to produce estimates at the national and regional level over time for the civilian, non-institutionalized population of the United States and some subpopulations of interest. The data in the Round 1 file pertain to approximately the first half of calendar year 1996. Two more rounds of data collection cover the remainder of 1996 while a fourth round will follow the same sample into 1997. Data in File 2 were obtained in the second round of MEPS HC data collection, which occurred between August and November, 1996.

The 1996 MEPS HC sample consisted of a subsample of households (occupied dwelling units) that responded to the 1995 National Health Interview Survey (NHIS) in the two panels reserved for the MEPS HC. Analysis can be undertaken using both the individual and the family as units of analysis.

For detailed information on the sample design, see Cohen S. Sample design of the 1996 Medical Expenditure Panel Survey Household Component. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Methodology Report No. 2*. AHCPR Pub. No. 97-0027.

MEPS--Linked to the National Health Interview Survey

The sample of 10,639 households (occupied dwelling units) selected for the 1996 Panel of MEPS HC consisted of a nationally representative subsample of the households responding to the 1995 National Health Interview Survey (NHIS). The NHIS sample design has three stages of sample selection: an area sample of PSUs; a sample of segments (single or groups of blocks or block equivalents) within sampled PSUs; and a sample of housing units within segments. Among initially sampled households, those containing Hispanics and blacks were oversampled at rates of approximately 2 and 1.5, respectively, times the rate of remaining households. These same rates of oversampling are reflected in the MEPS HC sample of households. The only major difference in the definition of a household between NHIS and MEPS HC is that college aged students living away from home during the school year were interviewed at their place of residence for the NHIS but were identified by and linked to their parents' household for MEPS HC.

Response Rates

Since the 1996 MEPS Household Component sample was selected from a nationally representative sub-sample of households who were part of the 1995 NHIS, the overall response was derived from three component response rates. The NHIS response rate achieved for the households eligible for the MEPS HC was 93.9 percent. Of the 10,639 responding NHIS dwelling units eligible for the MEPS HC, 99.6 percent were identified with sufficient information to permit MEPS HC data collection. Within these dwelling units, there were 11,429 eligible reporting units targeted for interviews in Round 1, of which 83.1 percent responded to the first core MEPS HC interview. Two percent of the reporting units fielded in Round 1 could not be located; 15 percent were located and declined to participate in the MEPS HC interview, accounting for the 17 percent reporting unit nonresponse. Overall, the joint NHIS - Round 1 response rate for the 1996 MEPS HC household survey was 77.7 percent ($.939 \times .996 \times .831$). For Round 2, the response rate was 94.7 percent, resulting in a response rate of 73.6 percent overall from the NHIS interview through Round 2 of the MEPS.

3.2 Sample Weights, Estimation Issues and Variance Estimation

3.2.1 Sample Weights

The use of sample weights permits the derivation of estimates for the U.S. civilian, non-institutionalized population and subgroups of this population based on the sample data. Two weights are provided on each file: a person level weight and a family level weight. For File 1 estimates, see the documentation accompanying the first public use release of MEPS data, HC-001. Documentation for File 2 sample weights follows.

Person Level Weight

The person level weight variable on File 2 is WGTSP2T. A person level weight was assigned to all key, eligible and in-scope members of the U.S. civilian, non-institutionalized population for whom data were collected in both the first and second rounds of data collection for the 1996 MEPS HC. This weight reflects the original household probability of selection for the NHIS, ratio-adjustment to NHIS national population estimates at the household level, adjustment for non-participation in MEPS HC at the dwelling unit level, and poststratification to figures obtained from March, 1996 Current Population Survey data at the family and person level. The person level poststratification reflected population distributions across census region; race/ethnicity (Hispanic, black/non-Hispanic, other); sex; and age. Overall, the weighted population estimate is 263,515,813 for the civilian noninstitutionalized population.

The person level estimates produced from these files are derived from a nationally representative sample of the civilian non-institutionalized population defined as of the first half of 1996. The estimates are to be interpreted as attributes of the target population defined as of the first half of 1996.

Family Level Weight

The family level weight on File 2 is WGTRU2T. A family was defined to be two or more persons living together who are related by blood, marriage, adoption, or foster care. The members of a "family" unit can vary over time due to births, deaths, and migration in and out of family units. For the purposes of assigning a family level weight for each round of MEPS HC, a family unit was defined as the set of related people living together during the reference period for whom data were collected (for Round 1, from January 1, 1996 to the date of the Round 1 interview and for Round 2, from the date of the Round 1 interview to the date of the Round 2 interview). Persons who died during the reference period were considered to be family members, as were people for whom data could be collected for a portion of the round if a person left the civilian, non-institutionalized population later in the round (i.e., if a person was institutionalized, left the country, or joined the military). College age students living away from home during the school year also were considered family members. A family member need not be key nor in-scope. Such persons are family members for the "snapshot" of the family represented by the Round and may have made important contributions to such items as a family's income or health care coverage.

All responding family units with at least one key, eligible, in-scope person as well as reporting units consisting of a single key, in-scope, eligible respondent received a family level weight. At the family level, poststratification to March, 1996 CPS figures was undertaken reflecting factors such as family type (reference person married/spouse present; male reference person/no spouse present; female reference person/no spouse present), size of family, age of reference person, location of family (census region and MSA status), and race/ethnicity of reference person. The weighted estimate of the number of family units (including single person units) containing at least

one member of the U.S. civilian non-institutionalized population is 110,206,950. To produce family level estimates consistent with this population, a family level file needs to be prepared containing one record per family, with family level summary characteristics (based on persons in the family) and the family-level weight variable (WGTRU2T).

3.2.2 Estimation Issues

Analysts should note the following:

1. When analyzing Round 2 data by combining the File 2 data with data from the first MEPS public use data release (HC-001), only persons eligible for Round 2 (i.e., those with a value of 1, 3 or 4 for the File 2 variable ELIGRND2) should be included in family level analyses. (The analogous File 1 variable is ELIGRND1, which was provided on the first release of Round 1 data (HC-001)).
2. The variables HSELIG2 and ACCELIG indicate whether persons were eligible to receive the Health Status (HSELIG2=1) and Access to Care questions (ACCELIG=1), respectively. Persons who were dead as of the Round 2 interview date did not receive the Health Status questions; those who were dead or institutionalized as of the Round 2 interview date did not receive the Access to Care questions. When making estimates from this file, analysts should take care to exclude persons who did not receive the relevant questions.
3. The File 2 variables corresponding to questions AC20 through AC26 of the Access Section (CHNGUSC through OTHRPROB) come from questions asked at the family level and require the use of the family-level weight, WGTRU2T, for estimation when used as the primary analytical measure of interest.
4. While variables and categories with very small cell sizes have been suppressed, some remaining variables will not have adequate numbers of observations to support reliable estimation. Users are urged to use a minimum sample size of 100 MEPS participants with positive weights to produce survey estimates. In addition, survey estimates with relative standard errors greater than or equal to 0.3 are to be treated as unreliable.

Following are examples of how to make person-level and family-level estimates using the Access to Care data.

- A. Person-level estimates. Example: Making estimates of the total population eligible for the Access to Care Section and the percent of the population with no usual source of health care.
 - 1. Subset File 2 to only those 22,149 persons with positive person level weights ($WGTSP2T > 0$).
 - 2. From this file, exclude those persons with $ACCELIG = 2$. There are 72 such people with positive person level weights, leaving 22,077 unweighted individuals.
 - 3. Apply the weight $WGTSP2T$ to the 22,077 persons to obtain the population estimate of 262,654 thousand Americans.
 - 4. Next exclude those persons with $HAVEUSC = -7$, -8 , or -9 (those persons for whom a response was refused, don't know, or not ascertained), leaving 21,979 unweighted individuals with valid data on $HAVEUSC$.
 - 5. Run a frequency distribution on $HAVEUSC$ weighted by $WGTSP2T$. The results will indicate that 17.6 percent of the population have no usual source of health care ($HAVEUSC = 2$). This estimate assumes that the nonresponders follow the same distribution as the respondents.
- B. Family-level estimates. Example: Making estimates of the total number of families and the percent of families experiencing difficulty or delay or not receiving needed health care due to any reason.
 - 1. Concatenate the variables $DUID$ and $FAMID2$ into a variable called $DUIDFAM2$.
 - 2. Sort the file by $DUIDFAM2$ and then subset to one record per $DUIDFAM2$ (i.e., retain only the first record for each value of $DUIDFAM2$). This will result in 9,084 records.
 - 3. Apply the weight $WGTRU2T$ to the 9,084 records to obtain the population estimate of 110,207 thousand American families.
 - 4. Exclude records with $OBTAINHC < 0$.

5. Run a frequency distribution on OBTAINHC weighted by WGTRU2T. The results will indicate that 11.6 percent of American families experienced difficulty or delay or did not receive needed health care due to any reason (OBTAINHC=1).

Note: These estimates duplicate numbers which can be found in Weinick RM, Zuvekas SH, and Drilea SK. Access to health care--sources and barriers: 1996. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Research Findings No. 3*. AHCPR Pub. No. 98-0001.

Many of the variables contained on File 2 have missing values for the population of persons with positive person level weights (WGTSP2T>0, n=22,149). In order to produce national estimates, some nonresponse adjustment or imputation strategy will need to be implemented by the analyst to correct for potential nonresponse bias.

3.2.3 Variance Estimation

To obtain estimates of variability (such as the standard error of sample estimates or corresponding confidence intervals) for estimates based on MEPS HC survey data, one needs to take into account the complex sample design of MEPS HC for both person and family level analyses. Various approaches can be used to develop such estimates of variance, using a Taylor series method for variance estimation or alternative replication methodologies. Replicate weights have not been developed for the Round 1 or 2 MEPS HC data; the focus here is to identify the variables needed to implement a Taylor series estimation approach.

Using such an approach, variance estimation strata and the variance estimation PSUs within these strata must be specified. The corresponding variables on File 2 are VARSTRT2 and VARPSU2, respectively. Specifying a "with replacement" design in a computer software package such as SUDAAN should provide estimated standard errors appropriate for assessing the variability of MEPS HC survey estimates. It should be noted that the number of degrees of freedom associated with estimates of variability indicated by such a package may not appropriately reflect the number available. For MEPS HC sample estimates for characteristics generally distributed throughout the country (and thus the sample PSUs), a reasonable rule of thumb is that there are roughly 170 degrees of freedom associated with the corresponding estimates of variance.

4. Programming Information

File 1:

Description: MEPS HC 1996 Panel Round 1 Parent Identifiers and HMO Enrollment Data

File Name: HC002F1.DAT

Number of Observations: 24,676

Number of Variables: 12

Record Length: 57
Record Format: fixed
Record Identifier and Sort Key: DUPERSID

File 2:

Description: MEPS HC 1996 Panel Round 2 Health Status and Access to Care Data
File Name: HC002F2.DAT
Number of Observations: 23,767
Number of Variables: 134
Record Length: 296
Record Format: fixed
Record Identifier and Sort Key: DUPERSID

D. Codebooks

MEPS PUBLIC USE RELEASE HC-002
FILE 1: 1996 PANEL ROUND 1 PARENT IDENTIFIERS AND MANAGED CARE DATA
CODEBOOK

DATE: October 16, 1997

This codebook contains weighted and unweighted frequencies for variables on File 1 of MEPS public use release HC-002. This file contains person-level record identifiers, parent identifiers and variables from the Managed Care Section from Round 1 of the 1996 MEPS Household Component. Weighted frequencies were derived using the person-level weight WGTSP1. All estimates must be weighted in order to obtain unbiased national estimates. A family-level weight, WGTRU1, has also been provided. See Section 3.2 in the documentation. The source of each variable is identified in the column labeled "question number". For variables coming directly from one question, this column contains the question number. Variables which are CAPI derived enumeration items, and those which are constructed from two or more questions, are indicated in this column by "NA" and "CONSTRUCTED", respectively. A crosswalk that indicates source questions for constructed variables appears at the end of this codebook. Names of edited variables end in an X. It should be noted that for the small number of persons who have zero weights, but reside in units with positive unit weights, a small amount of missing data remains. General information on file content, variable construction, and programming is provided in the codebook documentation.

MEPS PUBLIC USE RELEASE HC-002
FILE 1: 1996 PANEL ROUND 1 PARENT IDENTIFIERS AND MANAGED CARE DATA
CODEBOOK

DATE: October 16, 1997

ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

-----ALPHABETICAL LISTING OF VARIABLES-----

<u>START</u>	<u>END</u>	<u>NAME</u>	<u>DESCRIPTION</u>
20	22	DADPID1X	PID OF PERSON'S FATHER
1	5	DUID	DU ID
9	16	DUPERSID	SAMPLE PERSON ID (DUID+PN)
25	26	MCRHMO1	PID ENROLLED IN MEDICARE HMO
17	19	MOMPID1X	PID OF PERSON'S MOTHER
6	8	PID	PERSON NUMBER (PN)
23	24	PRVHMO1	PID ENROLLED IN PRIVATE HMO PLAN
27	28	PUBHMO1	PID ENROLLED IN PUBLIC HMO
56	57	VARPSU1	VARIANCE ESTIMATION PSU
53	55	VARSTR1	VARIANCE ESTIMATION STRATUM
41	52	WGTRU1	FAMILY LEVEL ROUND 1 WEIGHT
29	40	WGTSP1	PERSON ROUND 1 WEIGHT

MEPS PUBLIC USE RELEASE HC-002
FILE 1: 1996 PANEL ROUND 1 PARENT IDENTIFIERS AND MANAGED CARE DATA
CODEBOOK

DATE: October 16, 1997

ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

-----POSITIONAL LISTING OF VARIABLES-----

<u>START</u>	<u>END</u>	<u>NAME</u>	<u>DESCRIPTION</u>
1	5	DUID	DU ID
6	8	PID	PERSON NUMBER (PN)
9	16	DUPERSID	SAMPLE PERSON ID (DUID+PN)
17	19	MOMPID1X	PID OF PERSON'S MOTHER
20	22	DADPID1X	PID OF PERSON'S FATHER
23	24	PRVHMO1	PID ENROLLED IN PRIVATE HMO PLAN
25	26	MCRHMO1	PID ENROLLED IN MEDICARE HMO
27	28	PUBHMO1	PID ENROLLED IN PUBLIC HMO
29	40	WGTSP1	PERSON ROUND 1 WEIGHT
41	52	WGTRU1	FAMILY LEVEL ROUND 1 WEIGHT
53	55	VARSTRT1	VARIANCE ESTIMATION STRATUM
56	57	VARPSU1	VARIANCE ESTIMATION PSU

MEPS PUBLIC USE RELEASE HC-002
FILE 1: 1996 PANEL ROUND 1 PARENT IDENTIFIERS AND MANAGED CARE DATA
CODEBOOK

DATE: October 16, 1997

<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>DUID</u>	<u>DU ID</u>	5.0	NUM	1	5	NA
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	2-10597	24,676		263,515,813		
	TOTAL	24,676		263,515,813		
<u>PID</u>	<u>PERSON NUMBER (PN)</u>	3.0	NUM	6	8	NA
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	10-164	24,676		263,515,813		
	TOTAL	24,676		263,515,813		
<u>DUPERSID</u>	<u>SAMPLE PERSON ID (DUID+PN)</u>	8.0	CHAR	9	16	NA
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	2018-10597041	24,676		263,515,813		
	TOTAL	24,676		263,515,813		
<u>MOMPID1X</u>	<u>PID OF PERSON'S MOTHER</u>	3.0	NUM	17	19	RE76
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	-9 NOT ASCERTAINED	85		21,713		
	-1 INAPPLICABLE	15,888		174,169,186		
	10-136	8,703		89,324,914		
	TOTAL	24,676		263,515,813		
<u>DADPID1X</u>	<u>PID OF PERSON'S FATHER</u>	3.0	NUM	20	22	RE76
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	-9 NOT ASCERTAINED	76		21,713		
	-1 INAPPLICABLE	18,018		194,240,773		
	10-156	6,582		69,253,327		
	TOTAL	24,676		263,515,813		
<u>PRVHMO1</u>	<u>PID ENROLLED IN PRIVATE HMO PLAN</u>	2.0	NUM	23	24	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	-1 INAPPLICABLE	9,396		84,695,543		
	1 YES	7,908		91,659,505		
	2 NO	7,372		87,160,765		
	TOTAL	24,676		263,515,813		

MEPS PUBLIC USE RELEASE HC-002
FILE 1: 1996 PANEL ROUND 1 PARENT IDENTIFIERS AND MANAGED CARE DATA
CODEBOOK

DATE: October 16, 1997

<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>MCRHMO1</u>	<u>PID ENROLLED IN MEDICARE HMO</u>	<u>2.0</u>	<u>NUM</u>	<u>25</u>	<u>26</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	-1 INAPPLICABLE	21,686		228,538,391		
	1 YES	425		4,901,298		
	2 NO	2,565		30,076,124		
	TOTAL	24,676		263,515,813		
<u>PUBHMO1</u>	<u>PID ENROLLED IN PUBLIC HMO</u>	<u>2.0</u>	<u>NUM</u>	<u>27</u>	<u>28</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	-1 INAPPLICABLE	21,124		232,122,522		
	1 YES	1,441		13,050,466		
	2 NO	2,111		18,342,826		
	TOTAL	24,676		263,515,813		
<u>WGTSP1</u>	<u>PERSON ROUND 1 WEIGHT</u>	<u>12.6</u>	<u>NUM</u>	<u>29</u>	<u>40</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	0	1,064		0		
	1010.16-53057.55	23,612		263,515,813		
	TOTAL	24,676		263,515,813		
<u>WGTRU1</u>	<u>FAMILY LEVEL ROUND 1 WEIGHT</u>	<u>12.6</u>	<u>NUM</u>	<u>41</u>	<u>52</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	1368.04-47426.72	24,676		263,515,813		
	TOTAL	24,676		263,515,813		
<u>VARSTR1</u>	<u>VARIANCE ESTIMATION STRATUM</u>	<u>3.0</u>	<u>NUM</u>	<u>53</u>	<u>55</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	1-140	24,676		263,515,813		
	TOTAL	24,676		263,515,813		
<u>VARPSU1</u>	<u>VARIANCE ESTIMATION PSU</u>	<u>2.0</u>	<u>NUM</u>	<u>56</u>	<u>57</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP1</u>			
	1-45	24,676		263,515,813		
	TOTAL	24,676		263,515,813		

MEPS PUBLIC USE RELEASE HC-002
FILE 2: 1996 PANEL ROUND 2 HEALTH STATUS AND ACCESS TO CARE DATA
CODEBOOK

DATE: October 21, 1997

This codebook contains weighted and unweighted frequencies for variables on File 2 of MEPS public use release HC-002. This file contains person-level record and family identifiers, and variables from the Health Status and Access to Care Sections from Round 2 of the 1996 MEPS Household Component. Weighted frequencies were derived using the person-level weight WGTSP2T. All estimates must be weighted in order to obtain unbiased national estimates. A family-level weight, WGTRU2T, has also been provided. See Section 3.2 in the documentation. The source of each variable is identified in the column labeled "question number". For variables coming directly from one question, this column contains the question number. Variables which are CAPI derived enumeration items, and those which are constructed from two or more questions, are indicated in this column by "NA" and "CONSTRUCTED", respectively. A crosswalk that indicates source questions for constructed variables appears at the end of this codebook. Names of edited variables end in an X. It should be noted that for the small number of persons who have zero weights, but reside in units with positive unit weights, a small amount of missing data remains. General information on file content, variable construction, and programming is provided in the codebook documentation.

MEPS PUBLIC USE RELEASE HC-002
FILE 2: 1996 PANEL ROUND 2 HEALTH STATUS AND ACCESS TO CARE DATA
CODEBOOK

DATE: October 21, 1997

ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

-----ALPHABETICAL LISTING OF VARIABLES-----

START	END	NAME	DESCRIPTION
125	125	ACCELIG	IS PERS ELIGIBLE FOR ACCESS SUPPLEMENT
32	33	ADLHLP2	LTC FLAG: ADL HELP/SUPERVISION - RD2
64	65	ADULPROB	PROB. GETTING ALONG W/ ADULTS (5-17 YRS)
166	167	AFFORD	OTH REAS GO TO USC: CAN'T AFFRD ELSEW
216	217	ANYUSC	HAS ANYONE HAD A USC IN LAST YEAR
196	197	APPDIFFC	HOW DIFFICULT TO GET APPT WITH USC
194	195	APPTWLK	WHEN SEE USC, HAVE APPT OR WALK IN
170	171	AVAILTIM	OTH REAS GO TO USC: AVAIL WHEN TIME
76	77	BEHAVHME	PROBLEM WITH BEHAVIOR AT HOME (5-17 YRS)
174	175	BSTPLACE	OTH REAS GO TO USC: BEST FOR COND
38	39	CANTPLAY	UNABLE TAKE PART IN USUAL PLAY (=<4 YRS)
104	105	CANTSCHL	LIMITD/UNABLE TO GO TO SCHOOL (5-17 YRS)
148	149	CARECOST	OTH REAS NO USC: COST OF MED CARE
262	263	CHLDCARE	DIFFICULTY: COULDN'T GET CHILD CARE
212	213	CHNGUSC	HAS ANYONE CHANGED USC IN LAST YEAR
206	207	CONFIDNT	CONFIDENT IN USC PROV'S ABILITY?
172	173	CONVENIE	OTH REAS GO TO USC: CONVENIENCE
56	57	DADPROB	PROB. GETTING ALONG W/ FATHER (5-17 YRS)
142	143	DIFFPLAC	OTH REAS NO USC: DIFFERENT PLACES
240	241	DISTANCE	DIFFICULTY: DISTANCE
164	165	DKELSEWH	OTH REAS GO TO USC: DK WH ELSE TO GO
258	259	DKWHERGO	DIFFICULTY: DK WHERE TO GO
136	137	DKWHRUSC	OTH REAS NO USC: DK WHERE TO GO
42	43	DTPSHOT	IMMUNIZATION TO DTP (=<6 YRS)
1	5	DUID	DU ID
9	16	DUPERSID	SAMPLE PERSON ID (DUID+PN)
23	23	ELIGRND2	R2 ELIGIBILITY
254	255	EQUIPMNT	DIFFICULTY: NO APPROPRIATE EQUIP
244	245	EXPENSIV	DIFFICULTY: TOO EXPEN TO GET THERE
100	101	FAMCNSL	FAMILY TRAINING/COUNSELING (5-17 YRS)
17	18	FAMID2	FAMILY IDENTIFIER (W STUDNT MERGD IN)-R2
114	115	GETSICK	CHILD CATCH THINGS GOING ARND (0-17 YRS)
180	181	GETTOUSC	HOW DOES PERSN GET TO USC PROVIDER
62	63	HAVEFUN	PROBLEM HAVING FUN (5-17 YRS)
126	127	HAVEUSC	DOES PERSON HAVE A USC PROVIDER?
222	223	HCNEEDS	SATISFIED FAMILY CAN GET CARE
110	111	HEALTHY	CHILD RESISTS ILLNESS WELL (0-17 YRS)
246	247	HEARPROB	DIFFICULTY: HEARING IMPAIR/ LOSS
116	117	HEIGHTFT	CHILD'S HEIGHT-FEET (0-17 YRS)
118	119	HEIGHTIN	CHILD'S HEIGHT-INCHES (0-17 YRS)
52	53	HEPBSHOT	IMMUNIZATION TO HEPATITIS B (=<6 YRS)
25	25	HSELIG2	IS PERS ELIGIBLE FOR HS SUPPLEMENT
30	31	IADLHLP2	LTC FLAG: IADL HELP/SUPERVISION - RD2
24	24	INSCOPE2	INSCOPE INDICATOR - R2
252	253	INSIDE	DIFFICULTY: HARD TO GET AROUND
232	233	INSNOPAY	DIFFICULTY: INS COMPANY WON'T PAY
176	177	INSREASN	OTH REAS GO TO USC: INSUR-RELATED
144	145	INSRPLAN	OTH REAS NO USC: JUST CHANGED INSUR
236	237	INSRQREF	DIFFICULTY: INS REQUIRED REFERRAL
250	251	INTOBLDG	DIFFICULTY: HARD TO GET INTO BLDG
22	22	KEYNESS2	PERSON KEY STATUS - R2
70	71	KIDSPROB	PROB. GETTING ALONG W/OTH KIDS (5-17 YRS)
248	249	LANGBARR	DIFFICULTY: LANGUAGE BARRIER
98	99	LIFESKIL	LIFE SKILLS TRAING/SELF-HELP (5-17 YRS)

MEPS PUBLIC USE RELEASE HC-002
FILE 2: 1996 PANEL ROUND 2 HEALTH STATUS AND ACCESS TO CARE DATA
CODEBOOK

DATE: October 21, 1997

ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

-----ALPHABETICAL LISTING OF VARIABLES-----

START	END	NAME	DESCRIPTION
162	163	LIKESUSC	OTH REAS GO TO USC: PREFRS/LIKES USC
34	35	LIMTACT	LIMITED IN ANY ACTIVITIES (= <4 YRS)
106	107	LMOTHACT	LIM IN ACTIVITY OTH THAN SCHL (5-17 YRS)
184	185	LOCATION	USC LOCATION
226	227	MAINPROB	MAIN REASON EXPERIENCED DIFFICULTY
186	187	MINORPRB	GO TO USC FOR NEW HEALTH PROBLEMS
50	51	MMRSHOT	IMMUNIZ. MEASLES,MUMPS,RUBELLA (= <6 YRS)
28	29	MNTHLTH2	PERCEIVED MENTAL HEALTH STATUS-RD2
54	55	MOMPROB	PROB. GETTING ALONG W/ MOTHER (5-17 YRS)
146	147	MYSELF	OTH REAS NO USC: NO DOCS/TREAT SELF
66	67	NERVAFRD	PROB. FEELING NERVOUS, AFRAID (5-17 YRS)
134	135	NEWAREA	OTH REAS NO USC: RECENTLY MOVED
230	231	NOAFFORD	DIFFICULTY: COULDN'T AFFORD CARE
220	221	NOCARE	DID ANYONE GO WITHOUT HEALTH CARE
228	229	NOOTHPRB	DIFFICULTY: NO OTHER PROBLEMS
130	131	NOREAS04	OTH REAS NO USC: NO OTHER REASONS (AC04)
160	161	NOREAS09	OTH REAS GO TO USC:NO OTH REASONS (AC09)
264	265	NOTIME	DIFFICULTY: NO TIME/TOOK TOO LONG
112	113	NTHLTHY	LESS HLTHY THAN SAMEAGE CHDRN (0-17 YRS)
44	45	NUMDTP	NUMBER OF TIMES DTP (= <6 YRS)
48	49	NUMPOLIO	NUMBER OF TIMES POLIO (= <6 YRS)
224	225	OBTAINHC	ANYONE HAVE DIFFICLTY OBTAIN CARE
90	91	OCUPTHER	OCCUPATIONAL THERAPY (5-17 YRS)
192	193	OFFHOURS	USC HAS OFFICE HRS NIGHTS/WEEKENDS
168	169	OFFICE	OTH REAS GO TO USC: DR OFFICE AT OPD
256	257	OFFWORK	DIFFICULTY: COULDN'T GET TIME OFF
150	151	OTHINSRE	OTH REAS NO USC: OTHER INSUR REASON
152	153	OTHREA04	OTH REAS NO USC: OTHER REASON (AC04)
178	179	OTHREA09	OTH REAS GO TO USC: OTHER REASON (AC09)
266	267	OTHRPROB	DIFFICULTY: OTHER
102	103	OTHRSVCS	OTHER RELATED SERVICES (5-17 YRS)
140	141	PERSLANG	OTH REAS NO USC: LANGUAGE
200	201	PHONEDIF	HOW DIFFICULT CONTACT USC BY PHONE
96	97	PHYSTHER	PHYSICAL THER/MOBILITY TRAING (5-17 YRS)
6	8	PID	PERSON NUMBER (PN)
36	37	PLAYLIMT	LIM KIND/AMNT OF PLAY ACTIVITY (= <4 YRS)
46	47	POLIOSHT	IMMUNIZATION TO POLIO (= <6 YRS)
234	235	PREEXCON	DIFFICULTY: PRE-EXISTING CONDITION
188	189	PREVENTC	GO TO USC FOR PREVENTIVE HLTH CARE
202	203	PRLISTEN	DOES USC PROV LISTEN?
84	85	PROGTXT	DESCRIPTION OF SPEC ED PROGRM (5-17 YRS)
208	209	PROVSTAF	HOW SATISFIED WITH USC STAFF
156	157	PROVTYPX	PROVIDER TYPE
88	89	PSYCNSL	PSYCHOLOGICAL COUNSELING (5-17 YRS)
242	243	PUBTRANS	DIFFICULTY: PUBLIC TRANSPORTATION
94	95	READINTR	READER OR INTERPRETER (5-17 YRS)
190	191	REFFRLS	GO TO USC FOR REFERRALS
260	261	REFUSERV	DIFFICULTY: WAS REFUSED SERVICES
238	239	REFUSIN	DIFFICULTY: DR REFUSED INS PLAN
19	21	RND2REF	PID OF REFERENCE PERSON AT R2
26	27	RTEHLTH2	PERCEIVED HEALTH STATUS-RD2
60	61	SCHLBEHA	PROBLEM BEHAVIOR AT SCHOOL (5-17 YRS)
74	75	SCHLPROB	PROBLEM WITH SCHOOLWORK (5-17 YRS)
132	133	SELSICK	OTH REAS NO USC: SELDOM/NEVERSICK

MEPS PUBLIC USE RELEASE HC-002
FILE 2: 1996 PANEL ROUND 2 HEALTH STATUS AND ACCESS TO CARE DATA
CODEBOOK

DATE: October 21, 1997

ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

-----ALPHABETICAL LISTING OF VARIABLES-----

<u>START</u>	<u>END</u>	<u>NAME</u>	<u>DESCRIPTION</u>
68	69	SIBPROB	PROB. GETTING ALONG W/ SIBLINGS (5-17 YRS)
86	87	SPCHTHER	SPEECH THERAPY (5-17 YRS)
82	83	SPECEDUC	IN SPECIAL ED./RECEIVES SERVS (5-17 YRS)
108	109	SPECIFLM	WHAT TYPE OF LIMITATION (5-17 YRS)
40	41	SPECPROG	PARTICIPATE IN SPECIAL PROGRAMS (≤4 YRS)
80	81	SPECSCHL	HLTH LIMS SCHL/NEED SP. PRGRM (5-17 YRS)
72	73	SPORTHOB	PROB. GETTING ACT SPORT/HOBBY (5-17 YRS)
204	205	TREATMNT	PROV ASK ABOUT OTHER TREATMENTS
78	79	TROUBLE	PROBLEM STAYING OUT OF TROUBLE(5-17 YRS)
92	93	TUTORING	TUTORING (5-17 YRS)
182	183	TYPEPERS	USC TYPE OF PROVIDER
154	155	TYPEPLCE	USC TYPE OF PLACE
58	59	UNHAPSAD	PROB. FEELING UNHAPPY OR SAD (5-17 YRS)
138	139	USCNOTAV	OTH REAS NO USC: USC NOT AVAILABLE
210	211	USCQUAL	SATISFIED WITH QUALITY OF CARE
295	296	VARPSU2	VARIANCE ESTIMATION PSU - ROUND 2
292	294	VARSTR2	VARIANCE ESTIMATION STRATUM - ROUND2
198	199	WAITTIME	WITH APPT, HOW LONG TIL SEEN BY USC
120	122	WEIGHTLB	CHILD'S WEIGHT-POUNDS (0-17 YRS)
123	124	WEIGHTOZ	CHILD'S WEIGHT-OUNCES (0-17 YRS)
268	279	WGTRU2T	FAMILY LEVEL ROUND 2 WEIGHT
280	291	WGTSP2T	PERSON ROUND 2 WEIGHT
214	215	YCHNGUSC	WHY DID PERSON(S) CHANGE USC
158	159	YGOTUSC	MAIN REASON PERS GOES TO HOSP USC
218	219	YNOMORE	WHY DON'T THEY HAVE A USC ANYMORE?
128	129	YNOUSC	MAIN REASON PERS DOESN'T HAVE A USC

MEPS PUBLIC USE RELEASE HC-002
FILE 2: 1996 PANEL ROUND 2 HEALTH STATUS AND ACCESS TO CARE DATA
CODEBOOK

DATE: October 21, 1997

ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

-----POSITIONAL LISTING OF VARIABLES-----

<u>START</u>	<u>END</u>	<u>NAME</u>	<u>DESCRIPTION</u>
1	5	DUID	DU ID
6	8	PID	PERSON NUMBER (PN)
9	16	DUPERSID	SAMPLE PERSON ID (DUID+PN)
17	18	FAMID2	FAMILY IDENTIFIER (W STUDNT MERGD IN)-R2
19	21	RND2REF	PID OF REFERENCE PERSON AT R2
22	22	KEYNESS2	PERSON KEY STATUS - R2
23	23	ELIGRND2	R2 ELIGIBILITY
24	24	INSCOPE2	INSCOPE INDICATOR - R2
25	25	HSELIG2	IS PERS ELIGIBLE FOR HS SUPPLEMENT
26	27	RTEHLTH2	PERCEIVED HEALTH STATUS-RD2
28	29	MNTHLTH2	PERCEIVED MENTAL HEALTH STATUS-RD2
30	31	IADLHLP2	LTC FLAG: IADL HELP/SUPERVISION - RD2
32	33	ADLHLP2	LTC FLAG: ADL HELP/SUPERVISION - RD2
34	35	LIMTACT	LIMITED IN ANY ACTIVITIES (= <4 YRS)
36	37	PLAYLIMT	LIM KIND/AMNT OF PLAY ACTVITY (= <4 YRS)
38	39	CANTPLAY	UNABLE TAKE PART IN USUAL PLAY (= <4 YRS)
40	41	SPECPROG	PARTICIPATE IN SPECIAL PROGRMS (= <4 YRS)
42	43	DTPSHOT	IMMUNIZATION TO DTP (= <6 YRS)
44	45	NUMDTP	NUMBER OF TIMES DTP (= <6 YRS)
46	47	POLIOSHT	IMMUNIZATION TO POLIO (= <6 YRS)
48	49	NUMPOLIO	NUMBER OF TIMES POLIO (= <6 YRS)
50	51	MMRSHOT	IMMUNIZ. MEASLES,MUMPS,RUBELLA (= <6 YRS)
52	53	HEPBSHOT	IMMUNIZATION TO HEPATITIS B (= <6 YRS)
54	55	MOMPROB	PROB. GETTING ALONG W/ MOTHER (5-17 YRS)
56	57	DADPROB	PROB. GETTING ALONG W/ FATHER (5-17 YRS)
58	59	UNHAPSAD	PROB. FEELING UNHAPPY OR SAD (5-17 YRS)
60	61	SCHLBEHA	PROBLEM BEHAVIOR AT SCHOOL (5-17 YRS)
62	63	HAVEFUN	PROBLEM HAVING FUN (5-17 YRS)
64	65	ADULPROB	PROB. GETTING ALONG W/ ADULTS (5-17 YRS)
66	67	NERVAFRD	PROB. FEELING NERVOUS, AFRAID (5-17 YRS)
68	69	SIBPROB	PROB. GETTING ALONG W/ SIBLNGS (5-17 YRS)
70	71	KIDSPROB	PROB. GETTING ALONG W/OTH KIDS (5-17 YRS)
72	73	SPORTHOB	PROB. GETTING ACT SPORT/HOBBY (5-17 YRS)
74	75	SCHLPROB	PROBLEM WITH SCHOOLWORK (5-17 YRS)
76	77	BEHAVHME	PROBLEM WITH BEHAVIOR AT HOME (5-17 YRS)
78	79	TROUBLE	PROBLEM STAYING OUT OF TROUBLE(5-17 YRS)
80	81	SPECSCHL	HLTH LIMS SCHL/NEED SP. PRGRM (5-17 YRS)
82	83	SPECEDUC	IN SPECIAL ED./RECEIVES SERVS (5-17 YRS)
84	85	PROGTX	DESCRIPTION OF SPEC ED PROGRAM (5-17 YRS)
86	87	SPCHTHER	SPEECH THERAPY (5-17 YRS)
88	89	PSYCNSL	PSYCHOLOGICAL COUNSELING (5-17 YRS)
90	91	OCUPTHER	OCCUPATIONAL THERAPY (5-17 YRS)
92	93	TUTORING	TUTORING (5-17 YRS)
94	95	READINTR	READER OR INTERPRETER (5-17 YRS)
96	97	PHYSTHER	PHYSICAL THER/MOBILITY TRAING (5-17 YRS)
98	99	LIFESKIL	LIFE SKILLS TRAING/SELF-HELP (5-17 YRS)
100	101	FAMCNSL	FAMILY TRAINING/COUNSELING (5-17 YRS)
102	103	OTHRSVCS	OTHER RELATED SERVICES (5-17 YRS)
104	105	CANTSCHL	LIMITD/UNABLE TO GO TO SCHOOL (5-17 YRS)
106	107	LMOTHACT	LIM IN ACTIVITY OTH THAN SCHL (5-17 YRS)
108	109	SPECIFLM	WHAT TYPE OF LIMITATION (5-17 YRS)
110	111	HEALTHY	CHILD RESISTS ILLNESS WELL (0-17 YRS)
112	113	NTHELTHY	LESS HLTHY THAN SAMEAGE CHDRN (0-17 YRS)
114	115	GETSICK	CHILD CATCH THINGS GOING ARND (0-17 YRS)

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ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

-----POSITIONAL LISTING OF VARIABLES-----

START	END	NAME	DESCRIPTION
116	117	HEIGHTFT	CHILD'S HEIGHT-FEET (0-17 YRS)
118	119	HEIGHTIN	CHILD'S HEIGHT-INCHES (0-17 YRS)
120	122	WEIGHTLB	CHILD'S WEIGHT-POUNDS (0-17 YRS)
123	124	WEIGHTOZ	CHILD'S WEIGHT-OUNCES (0-17 YRS)
125	125	ACCELIG	IS PERS ELIGIBLE FOR ACCESS SUPPLEMENT
126	127	HAVEUSC	DOES PERSON HAVE A USC PROVIDER?
128	129	YNOUSC	MAIN REASON PERS DOESN'T HAVE A USC
130	131	NOREAS04	OTH REAS NO USC: NO OTHER REASONS (AC04)
132	133	SELDISICK	OTH REAS NO USC: SELDOM/NEVERSICK
134	135	NEWAREA	OTH REAS NO USC: RECENTLY MOVED
136	137	DKWHRUSC	OTH REAS NO USC: DK WHERE TO GO
138	139	USCNOTAV	OTH REAS NO USC: USC NOT AVAILABLE
140	141	PERSLANG	OTH REAS NO USC: LANGUAGE
142	143	DIFFPLAC	OTH REAS NO USC: DIFFERENT PLACES
144	145	INSRPLAN	OTH REAS NO USC: JUST CHANGED INSUR
146	147	MYSELF	OTH REAS NO USC: NO DOCS/TREAT SELF
148	149	CARECOST	OTH REAS NO USC: COST OF MED CARE
150	151	OTHINSRE	OTH REAS NO USC: OTHER INSUR REASON
152	153	OTHREA04	OTH REAS NO USC: OTHER REASON (AC04)
154	155	TYPEPLCE	USC TYPE OF PLACE
156	157	PROVTYPX	PROVIDER TYPE
158	159	YGOTOUSC	MAIN REASON PERS GOES TO HOSP USC
160	161	NOREAS09	OTH REAS GO TO USC:NO OTH REASONS (AC09)
162	163	LIKESUSC	OTH REAS GO TO USC: PREFRS/LIKES USC
164	165	DKELSEWH	OTH REAS GO TO USC: DK WH ELSE TO GO
166	167	AFFORD	OTH REAS GO TO USC: CAN'T AFFRD ELSEW
168	169	OFFICE	OTH REAS GO TO USC: DR OFFICE AT OPD
170	171	AVAILTIM	OTH REAS GO TO USC: AVAIL WHEN TIME
172	173	CONVENIE	OTH REAS GO TO USC: CONVENIENCE
174	175	BSTPLACE	OTH REAS GO TO USC: BEST FOR COND
176	177	INSREASN	OTH REAS GO TO USC: INSUR-RELATED
178	179	OTHREA09	OTH REAS GO TO USC: OTHER REASON (AC09)
180	181	GETTOUSC	HOW DOES PERSN GET TO USC PROVIDER
182	183	TYPEPEPERS	USC TYPE OF PROVIDER
184	185	LOCATION	USC LOCATION
186	187	MINORPRB	GO TO USC FOR NEW HEALTH PROBLEMS
188	189	PREVENTC	GO TO USC FOR PREVENTIVE HLTH CARE
190	191	REFFRLS	GO TO USC FOR REFERRALS
192	193	OFFHOURS	USC HAS OFFICE HRS NIGHTS/WEEKENDS
194	195	APPTWLK	WHEN SEE USC, HAVE APPT OR WALK IN
196	197	APPDIFFC	HOW DIFFICULT TO GET APPT WITH USC
198	199	WAITTIME	WITH APPT, HOW LONG TIL SEEN BY USC
200	201	PHONEDIF	HOW DIFFICULT CONTACT USC BY PHONE
202	203	PRLISTEN	DOES USC PROV LISTEN?
204	205	TREATMNT	PROV ASK ABOUT OTHER TREATMENTS
206	207	CONFIDNT	CONFIDENT IN USC PROV'S ABILITY?
208	209	PROVSTAF	HOW SATISFIED WITH USC STAFF
210	211	USCQUAL	SATISFIED WITH QUALITY OF CARE
212	213	CHNGUSC	HAS ANYONE CHANGED USC IN LAST YEAR
214	215	YCHNGUSC	WHY DID PERSON(S) CHANGE USC
216	217	ANYUSC	HAS ANYONE HAD A USC IN LAST YEAR
218	219	YNOMORE	WHY DON'T THEY HAVE A USC ANYMORE?
220	221	NOCARE	DID ANYONE GO WITHOUT HEALTH CARE
222	223	HCNEEDS	SATISFIED FAMILY CAN GET CARE

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ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

-----POSITIONAL LISTING OF VARIABLES-----

<u>START</u>	<u>END</u>	<u>NAME</u>	<u>DESCRIPTION</u>
224	225	OBTAINHC	ANYONE HAVE DIFFICLTY OBTAIN CARE
226	227	MAINPROB	MAIN REASON EXPERIENCED DIFFICULTY
228	229	NOOTHPRB	DIFFICULTY: NO OTHER PROBLEMS
230	231	NOAFFORD	DIFFICULTY: COULDN'T AFFORD CARE
232	233	INSNOPAY	DIFFICULTY: INS COMPANY WON'T PAY
234	235	PREEXCON	DIFFICULTY: PRE-EXISTING CONDITION
236	237	INSRQREF	DIFFICULTY: INS REQUIRED REFERRAL
238	239	REFUSIN	DIFFICULTY: DR REFUSED INS PLAN
240	241	DISTANCE	DIFFICULTY: DISTANCE
242	243	PUBTRANS	DIFFICULTY: PUBLIC TRANSPORTATION
244	245	EXPENSIV	DIFFICULTY: TOO EXPEN TO GET THERE
246	247	HEARPROB	DIFFICULTY: HEARING IMPAIR/ LOSS
248	249	LANGBARR	DIFFICULTY: LANGUAGE BARRIER
250	251	INTOBLDG	DIFFICULTY: HARD TO GET INTO BLDG
252	253	INSIDE	DIFFICULTY: HARD TO GET AROUND
254	255	EQUIPMNT	DIFFICULTY: NO APPROPRIATE EQUIP
256	257	OFFWORK	DIFFICULTY: COULDN'T GET TIME OFF
258	259	DKWHEREGO	DIFFICULTY: DK WHERE TO GO
260	261	REFUSERV	DIFFICULTY: WAS REFUSED SERVICES
262	263	CHLDCARE	DIFFICULTY: COULDN'T GET CHILD CARE
264	265	NOTIME	DIFFICULTY: NO TIME/TOOK TOO LONG
266	267	OTHRPROB	DIFFICULTY: OTHER
268	279	WGTRU2T	FAMILY LEVEL ROUND 2 WEIGHT
280	291	WGTSF2T	PERSON ROUND 2 WEIGHT
292	294	VARSTR2	VARIANCE ESTIMATION STRATUM - ROUND2
295	296	VARPSU2	VARIANCE ESTIMATION PSU - ROUND 2

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>DUID</u>	<u>DU ID</u>	<u>5.0</u>	<u>NUM</u>	<u>1</u>	<u>5</u>	NA
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	2-10597	23,767			263,515,813	
	TOTAL	23,767			263,515,813	
<u>PID</u>	<u>PERSON NUMBER (PN)</u>	<u>3.0</u>	<u>NUM</u>	<u>6</u>	<u>8</u>	NA
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	10 - 164	23,767			263,515,813	
	TOTAL	23,767			263,515,813	
<u>DUPERSID</u>	<u>SAMPLE PERSON ID (DUID+PN)</u>	<u>8.0</u>	<u>CHAR</u>	<u>9</u>	<u>16</u>	NA
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	2018-10597041	23,767			263,515,813	
	TOTAL	23,767			263,515,813	
<u>FAMID2</u>	<u>FAMILY IDENTIFIER (W STUDNT MERGD IN)-R2</u>	<u>2.0</u>	<u>CHAR</u>	<u>17</u>	<u>18</u>	NA
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	A	22,241			250,414,805	
	B	1,325			11,583,767	
	C	164			1,248,220	
	D	30			201,461	
	E	7			67,560	
	TOTAL	23,767			263,515,813	
<u>RND2REF</u>	<u>PID OF REFERENCE PERSON AT R2</u>	<u>3.0</u>	<u>NUM</u>	<u>19</u>	<u>21</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	10 - 131	23,767			263,515,813	
	TOTAL	23,767			263,515,813	
<u>KEYNESS2</u>	<u>PERSON KEY STATUS - R2</u>	<u>1.0</u>	<u>NUM</u>	<u>22</u>	<u>22</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	1 KEY	22,540			263,515,813	
	2 NOT KEY	1,227			0	
	TOTAL	23,767			263,515,813	

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>ELIGRND2</u>	<u>R2 ELIGIBILITY</u>	<u>1.0</u>	<u>NUM</u>	<u>23</u>	<u>23</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	1 YES	22,785		261,462,695		
	3 YES: 1/1/96 TO DATE LEFT	125		1,063,302		
	4 YES: DATE BEGAN LIVNG IN	857		989,815		
	TOTAL	23,767		263,515,813		
<u>INSCOPE2</u>	<u>INSCOPE INDICATOR - R2</u>	<u>1.0</u>	<u>NUM</u>	<u>24</u>	<u>24</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	1 YES	23,735		263,515,813		
	2 NO	32		0		
	TOTAL	23,767		263,515,813		
<u>HSELIG2</u>	<u>IS PERS ELIGIBLE FOR HS SUPPLEMENT</u>	<u>1.0</u>	<u>NUM</u>	<u>25</u>	<u>25</u>	HSELIG2
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	1 YES	23,598		262,918,297		
	2 NO	169		597,515		
	TOTAL	23,767		263,515,813		
<u>RTEHLTH2</u>	<u>PERCEIVED HEALTH STATUS-RD2</u>	<u>2.0</u>	<u>NUM</u>	<u>26</u>	<u>27</u>	CE01
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	16		0		
	-8 DK	25		63,210		
	-7 REFUSED	25		0		
	-1 INAPPLICABLE	170		582,574		
	1 EXCELLENT	7,996		91,988,339		
	2 VERY GOOD	7,270		82,542,242		
	3 GOOD	5,663		60,666,926		
	4 FAIR	1,936		20,261,977		
	5 POOR	666		7,410,544		
	TOTAL	23,767		263,515,813		

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>MNTHLTH2</u>	<u>PERCEIVED MENTAL HEALTH STATUS-RD2</u>	<u>2.0</u>	<u>NUM</u>	<u>28</u>	<u>29</u>	<u>CE02</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	18	23,582			
	-8 DK	28	79,800			
	-7 REFUSED	28	16,421			
	-1 INAPPLICABLE	168	574,785			
	1 EXCELLENT	10,362	118,849,664			
	2 VERY GOOD	6,749	75,919,041			
	3 GOOD	5,108	53,929,017			
	4 FAIR	1,027	10,948,396			
	5 POOR	279	3,175,109			
	TOTAL	23,767	263,515,813			
<u>IADLHLP2</u>	<u>LTC FLAG: IADL HELP/SUPERVISION - RD2</u>	<u>2.0</u>	<u>NUM</u>	<u>30</u>	<u>31</u>	<u>CONSTRUCTED</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	158	345,159			
	-1 INAPPLICABLE	17	211,117			
	1 YES	659	7,583,201			
	2 NO	22,933	255,376,336			
	TOTAL	23,767	263,515,813			
<u>ADLHLP2</u>	<u>LTC FLAG: ADL HELP/SUPERVISION - RD2</u>	<u>2.0</u>	<u>NUM</u>	<u>32</u>	<u>33</u>	<u>CONSTRUCTED</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	162	359,189			
	-1 INAPPLICABLE	17	211,117			
	1 YES	361	4,062,483			
	2 NO	23,227	258,883,025			
	TOTAL	23,767	263,515,813			
<u>LIMTACT</u>	<u>LIMITED IN ANY ACTIVITIES (=<4 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>34</u>	<u>35</u>	<u>CONSTRUCTED</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	29	216,818			
	-1 INAPPLICABLE	22,065	244,586,668			
	1 YES	122	1,242,355			
	2 NO	1,551	17,469,972			
	TOTAL	23,767	263,515,813			

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<u>PLAYLIMT</u>	<u>LIM KIND/AMNT OF PLAY ACTIVITY (= <4 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>36</u>	<u>37</u>	<u>HE42</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	29	216,818			
	-1 INAPPLICABLE	23,616	262,056,640			
	1 YES	24	215,318			
	2 NO	98	1,027,037			
	TOTAL	23,767	263,515,813			
<u>CANTPLAY</u>	<u>UNABLE TAKE PART IN USUAL PLAY (= <4 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>38</u>	<u>39</u>	<u>HE43</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	29	216,818			
	-1 INAPPLICABLE	23,616	262,056,640			
	1 YES	16	133,576			
	2 NO	106	1,108,779			
	TOTAL	23,767	263,515,813			
<u>SPECPROG</u>	<u>PARTICIPATE IN SPECIAL PROGRMS (= <4 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>40</u>	<u>41</u>	<u>HE44</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	126	1,238,372			
	-1 INAPPLICABLE	23,616	262,056,640			
	1 YES	11	101,966			
	2 NO	14	118,835			
	TOTAL	23,767	263,515,813			
<u>DTPSHOT</u>	<u>IMMUNIZATION TO DTP (= <6 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>42</u>	<u>43</u>	<u>HE45</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	1	0			
	-8 DK	20	180,390			
	-1 INAPPLICABLE	21,349	237,163,646			
	1 YES	2,315	25,254,578			
	2 NO	82	917,199			
	TOTAL	23,767	263,515,813			

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>NUMDTP</u>	<u>NUMBER OF TIMES DTP (= <6 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>44</u>	<u>45</u>	<u>HE46</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	2			17,859	
	-8 DK	46			456,296	
	-1 INAPPLICABLE	21,452			238,261,235	
	1 ONCE	275			2,854,969	
	2 SEVERAL TIMES	1,992			21,925,454	
	TOTAL	23,767			263,515,813	
<u>POLIOSHT</u>	<u>IMMUNIZATION TO POLIO (= <6 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>46</u>	<u>47</u>	<u>HE47</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	1			0	
	-8 DK	35			367,211	
	-1 INAPPLICABLE	21,349			237,163,646	
	1 YES	2,274			24,788,512	
	2 NO	108			1,196,443	
	TOTAL	23,767			263,515,813	
<u>NUMPOLIO</u>	<u>NUMBER OF TIMES POLIO (= <6 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>48</u>	<u>49</u>	<u>HE48</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	2			17,859	
	-8 DK	85			945,790	
	-1 INAPPLICABLE	21,493			238,727,301	
	1 ONCE	358			3,657,384	
	2 SEVERAL TIMES	1,829			20,167,480	
	TOTAL	23,767			263,515,813	
<u>MMRSHOT</u>	<u>IMMUNIZ. MEASLES,MUMPS,RUBELLA (= <6 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>50</u>	<u>51</u>	<u>HE49</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	1			0	
	-8 DK	53			527,884	
	-1 INAPPLICABLE	21,349			237,163,646	
	1 YES	2,156			23,505,496	
	2 NO	208			2,318,787	
	TOTAL	23,767			263,515,813	

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<u>HEPBSHOT</u>	<u>IMMUNIZATION TO HEPATITIS B (= <6 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>52</u>	<u>53</u>	<u>HE49A</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	202	2,140,981			
	-1 INAPPLICABLE	21,350	237,163,646			
	1 YES	1,750	19,252,723			
	2 NO	465	4,958,463			
	TOTAL	23,767	263,515,813			
<u>MOMPROB</u>	<u>PROB. GETTING ALONG W/ MOTHER (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>54</u>	<u>55</u>	<u>HE50_01</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	12	132,051			
	-7 REFUSED	11	106,463			
	-1 INAPPLICABLE	19,073	214,334,279			
	0 NO PROBLEM	3,033	30,573,453			
	1 LITTLE PROBLEM	881	10,165,953			
	2 MEDIUM PROBLEM	496	5,443,847			
	3 BIG PROBLEM	157	1,771,196			
	4 VERY BIG PROBLEM	104	988,570			
	TOTAL	23,767	263,515,813			
<u>DADPROB</u>	<u>PROB. GETTING ALONG W/ FATHER (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>56</u>	<u>57</u>	<u>HE50_02</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	92	811,926			
	-7 REFUSED	11	106,463			
	-1 INAPPLICABLE	19,259	216,127,163			
	0 NO PROBLEM	2,885	29,028,380			
	1 LITTLE PROBLEM	752	8,942,185			
	2 MEDIUM PROBLEM	423	4,802,935			
	3 BIG PROBLEM	176	1,971,290			
	4 VERY BIG PROBLEM	169	1,725,470			
	TOTAL	23,767	263,515,813			
<u>UNHAPSAD</u>	<u>PROB. FEELING UNHAPPY OR SAD (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>58</u>	<u>59</u>	<u>HE50_03</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	8	39,485			
	-7 REFUSED	11	106,463			
	-1 INAPPLICABLE	19,041	214,014,802			
	0 NO PROBLEM	2,955	30,132,347			
	1 LITTLE PROBLEM	967	11,062,126			
	2 MEDIUM PROBLEM	534	5,698,341			
	3 BIG PROBLEM	168	1,636,013			
	4 VERY BIG PROBLEM	83	826,235			
	TOTAL	23,767	263,515,813			

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>SCHLBEHA</u>	<u>PROBLEM BEHAVIOR AT SCHOOL (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>60</u>	<u>61</u>	<u>HE50_04</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	14	106,555			
	-7 REFUSED	12	120,043			
	-1 INAPPLICABLE	19,070	214,287,145			
	0 NO PROBLEM	3,451	35,943,031			
	1 LITTLE PROBLEM	618	7,144,601			
	2 MEDIUM PROBLEM	349	3,397,347			
	3 BIG PROBLEM	144	1,485,533			
	4 VERY BIG PROBLEM	109	1,031,558			
	TOTAL	23,767	263,515,813			
<u>HAVEFUN</u>	<u>PROBLEM HAVING FUN (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>62</u>	<u>63</u>	<u>HE50_05</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	6	54,197			
	-7 REFUSED	11	106,463			
	-1 INAPPLICABLE	19,041	214,014,802			
	0 NO PROBLEM	4,194	43,819,765			
	1 LITTLE PROBLEM	293	3,337,351			
	2 MEDIUM PROBLEM	152	1,474,751			
	3 BIG PROBLEM	49	493,253			
	4 VERY BIG PROBLEM	21	215,231			
	TOTAL	23,767	263,515,813			
<u>ADULPROB</u>	<u>PROB. GETTING ALONG W/ ADULTS (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>64</u>	<u>65</u>	<u>HE50_06</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	5	44,456			
	-7 REFUSED	11	106,463			
	-1 INAPPLICABLE	19,041	214,014,802			
	0 NO PROBLEM	3,901	40,888,256			
	1 LITTLE PROBLEM	499	5,587,160			
	2 MEDIUM PROBLEM	201	1,898,708			
	3 BIG PROBLEM	73	635,253			
	4 VERY BIG PROBLEM	36	340,715			
	TOTAL	23,767	263,515,813			

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<u>NERVAFRD</u>	<u>PROB. FEELING NERVOUS, AFRAID (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>66</u>	<u>67</u>	<u>HE50_07</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	7	65,661			
	-7 REFUSED	11	106,463			
	-1 INAPPLICABLE	19,041	214,014,802			
	0 NO PROBLEM	2,888	29,256,777			
	1 LITTLE PROBLEM	1,003	11,524,132			
	2 MEDIUM PROBLEM	546	5,769,498			
	3 BIG PROBLEM	189	1,966,540			
	4 VERY BIG PROBLEM	82	811,940			
	TOTAL	23,767	263,515,813			
<u>SIBPROB</u>	<u>PROB. GETTNG ALONG W/ SIBLNGS (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>68</u>	<u>69</u>	<u>HE50_08</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	35	430,852			
	-7 REFUSED	11	106,463			
	-1 INAPPLICABLE	19,229	216,304,961			
	0 NO PROBLEM	2,163	21,088,687			
	1 LITTLE PROBLEM	1,023	11,323,138			
	2 MEDIUM PROBLEM	789	8,752,010			
	3 BIG PROBLEM	378	4,024,003			
	4 VERY BIG PROBLEM	139	1,485,699			
	TOTAL	23,767	263,515,813			
<u>KIDSPROB</u>	<u>PROB. GETTNG ALONG W/OTH KIDS (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>70</u>	<u>71</u>	<u>HE50_09</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	7	48,581			
	-7 REFUSED	10	94,091			
	-1 INAPPLICABLE	19,041	214,014,802			
	0 NO PROBLEM	3,516	36,212,709			
	1 LITTLE PROBLEM	734	8,602,005			
	2 MEDIUM PROBLEM	321	3,255,378			
	3 BIG PROBLEM	94	905,362			
	4 VERY BIG PROBLEM	44	382,884			
	TOTAL	23,767	263,515,813			

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<u>SPORTHOB</u>	<u>PROB. GETNG ACT SPORT/HOBBY (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>72</u>	<u>73</u>	<u>HE50_10</u>
	<u>VALUE</u>		<u>UNWEIGHTED</u>		<u>WEIGHTED BY WGTSP2T</u>	
	-8 DK		10		89,083	
	-7 REFUSED		10		94,091	
	-1 INAPPLICABLE		19,060		214,175,808	
	0 NO PROBLEM		3,660		38,028,117	
	1 LITTLE PROBLEM		462		5,212,438	
	2 MEDIUM PROBLEM		290		3,112,133	
	3 BIG PROBLEM		156		1,593,833	
	4 VERY BIG PROBLEM		119		1,210,309	
	TOTAL		23,767		263,515,813	
<u>SCHLPROB</u>	<u>PROBLEM WITH SCHOOLWORK (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>74</u>	<u>75</u>	<u>HE50_11</u>
	<u>VALUE</u>		<u>UNWEIGHTED</u>		<u>WEIGHTED BY WGTSP2T</u>	
	-8 DK		13		104,122	
	-7 REFUSED		11		107,672	
	-1 INAPPLICABLE		19,070		214,285,424	
	0 NO PROBLEM		3,202		33,103,379	
	1 LITTLE PROBLEM		678		7,593,838	
	2 MEDIUM PROBLEM		439		4,831,621	
	3 BIG PROBLEM		217		2,220,987	
	4 VERY BIG PROBLEM		137		1,268,770	
	TOTAL		23,767		263,515,813	
<u>BEHAVHME</u>	<u>PROBLEM WITH BEHAVIOR AT HOME (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>76</u>	<u>77</u>	<u>HE50_12</u>
	<u>VALUE</u>		<u>UNWEIGHTED</u>		<u>WEIGHTED BY WGTSP2T</u>	
	-8 DK		5		44,456	
	-7 REFUSED		11		106,463	
	-1 INAPPLICABLE		19,043		214,038,177	
	0 NO PROBLEM		2,742		27,801,689	
	1 LITTLE PROBLEM		1,101		12,387,408	
	2 MEDIUM PROBLEM		579		6,279,097	
	3 BIG PROBLEM		197		1,974,818	
	4 VERY BIG PROBLEM		89		883,705	
	TOTAL		23,767		263,515,813	

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<u>TROUBLE</u>	<u>PROBLEM STAYING OUT OF TROUBLE(5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>78</u>	<u>79</u>	<u>HE50_13</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	5	42,656			
	-7 REFUSED	10	94,091			
	-1 INAPPLICABLE	19,044	214,039,101			
	0 NO PROBLEM	3,413	35,558,211			
	1 LITTLE PROBLEM	684	7,612,083			
	2 MEDIUM PROBLEM	359	3,781,403			
	3 BIG PROBLEM	160	1,548,181			
	4 VERY BIG PROBLEM	92	840,086			
	TOTAL	23,767	263,515,813			
<u>SPECSCHL</u>	<u>HLTH LIMS SCHL/NEED SP. PRGRM (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>80</u>	<u>81</u>	<u>HE51</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	5	39,899			
	-7 REFUSED	3	3,244			
	-1 INAPPLICABLE	19,036	213,993,669			
	1 YES	328	3,189,323			
	2 NO	4,395	46,289,677			
	TOTAL	23,767	263,515,813			
<u>SPECEDUC</u>	<u>IN SPECIAL ED./RECEIVES SERVS (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>82</u>	<u>83</u>	<u>HE52</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	1	15,185			
	-1 INAPPLICABLE	23,439	260,326,490			
	1 YES, SPEC ED	163	1,608,254			
	2 YES, RELATED SERV	67	641,356			
	3 YES, BOTH	24	219,688			
	4 NO	51	465,906			
	91 OTHER	22	238,933			
	TOTAL	23,767	263,515,813			

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<u>PROGTX</u>	<u>DESCRIPTION OF SPEC ED PROGRAM (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>84</u>	<u>85</u>	HE52A
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	24	253,749			
	-8 DK	2	12,057			
	-1 INAPPLICABLE	23,558	261,448,937			
	1 LEARNING DISABILITY	65	676,269			
	2 SENSORY IMPAIRED PROGRAM	10	111,710			
	3 MENTALLY/PHYSICL IMPAIRE	14	130,380			
	4 SMALL CLASS, INDIV HELP	24	236,676			
	5 READING AND MATH HELP	15	131,742			
	6 SPEECH CLASS	15	124,459			
	7 OTHER	40	389,834			
	TOTAL	23,767	263,515,813			
<u>SPCHTHER</u>	<u>SPEECH THERAPY (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>86</u>	<u>87</u>	HE53
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-7 REFUSED	1	14,180			
	-1 INAPPLICABLE	23,676	262,654,769			
	1 YES	31	271,947			
	2 NO	59	574,917			
	TOTAL	23,767	263,515,813			
<u>PSYCNSL</u>	<u>PSYCHOLOGICAL COUNSELING (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>88</u>	<u>89</u>	HE53
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	1	9,748			
	-7 REFUSED	1	14,180			
	-1 INAPPLICABLE	23,676	262,654,769			
	1 YES	17	139,242			
	2 NO	72	697,873			
	TOTAL	23,767	263,515,813			
<u>OCUPTHER</u>	<u>OCCUPATIONAL THERAPY (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>90</u>	<u>91</u>	HE53
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-7 REFUSED	1	14,180			
	-1 INAPPLICABLE	23,676	262,654,769			
	1 YES	10	127,110			
	2 NO	80	719,754			
	TOTAL	23,767	263,515,813			

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<u>TUTORING</u>	<u>TUTORING (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>92</u>	<u>93</u>	<u>HE53</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-7 REFUSED	1			14,180	
	-1 INAPPLICABLE	23,676			262,654,769	
	1 YES	30			285,214	
	2 NO	60			561,650	
	TOTAL	23,767			263,515,813	
<u>READINTR</u>	<u>READER OR INTERPRETER (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>94</u>	<u>95</u>	<u>HE53</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-7 REFUSED	1			14,180	
	-1 INAPPLICABLE	23,676			262,654,769	
	1 YES	8			78,329	
	2 NO	82			768,535	
	TOTAL	23,767			263,515,813	
<u>PHYSTHER</u>	<u>PHYSICAL THER/MOBILITY TRAING (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>96</u>	<u>97</u>	<u>HE53</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-7 REFUSED	1			14,180	
	-1 INAPPLICABLE	23,676			262,654,769	
	1 YES	11			138,521	
	2 NO	79			708,342	
	TOTAL	23,767			263,515,813	
<u>LIFESKIL</u>	<u>LIFE SKILLS TRAING/SELF-HELP (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>98</u>	<u>99</u>	<u>HE53</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-7 REFUSED	1			14,180	
	-1 INAPPLICABLE	23,676			262,654,769	
	1 YES	7			53,523	
	2 NO	83			793,341	
	TOTAL	23,767			263,515,813	
<u>FAMCNSL</u>	<u>FAMILY TRAINING/COUNSELING (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>100</u>	<u>101</u>	<u>HE53</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-7 REFUSED	1			14,180	
	-1 INAPPLICABLE	23,676			262,654,769	
	1 YES	5			50,920	
	2 NO	85			795,944	
	TOTAL	23,767			263,515,813	

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<u>OTHRSVCS</u>	<u>OTHER RELATED SERVICES (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>102</u>	<u>103</u>	HE53
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-7 REFUSED	1			14,180	
	-1 INAPPLICABLE	23,676			262,654,769	
	1 YES	21			206,644	
	2 NO	69			640,220	
	TOTAL	23,767			263,515,813	
<u>CANTSCHL</u>	<u>LIMITD/UNABLE TO GO TO SCHOOL (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>104</u>	<u>105</u>	HE53
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	1			9,748	
	-1 INAPPLICABLE	23,439			260,326,490	
	1 LIM IN ATTENDANCE	35			318,468	
	2 UNABLE TO ATTEND	8			73,416	
	3 NEITHER	284			2,787,690	
	TOTAL	23,767			263,515,813	
<u>LMOTHACT</u>	<u>LIM IN ACTIVITY OTH THAN SCHL (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>106</u>	<u>107</u>	HE54
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	2			8,072	
	-7 REFUSED	3			3,244	
	-1 INAPPLICABLE	19,036			213,993,669	
	1 YES	130			1,350,344	
	2 NO	4,596			48,160,484	
	TOTAL	23,767			263,515,813	
<u>SPECIFLM</u>	<u>WHAT TYPE OF LIMITATION (5-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>108</u>	<u>109</u>	HE54OV
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	23,637			262,165,469	
	1 ACTIVE SPORTS	33			398,064	
	2 GEN PHYSICAL ACTIVITY	31			313,830	
	3 INTERACTION/COMMUNICATN	13			107,460	
	4 ALL ACTIVITIES	7			62,981	
	5 OTHER	46			468,009	
	TOTAL	23,767			263,515,813	

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<u>HEALTHY</u>	<u>CHILD RESISTS ILLNESS WELL (0-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>110</u>	<u>111</u>	<u>HE55_01</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	6	87,043			
	-7 REFUSED	5	3,244			
	-1 INAPPLICABLE	17,241	193,949,029			
	1 DEFINITELY FALSE	226	2,227,594			
	2 MOSTLY FALSE	547	5,551,502			
	3 MOSTLY TRUE	2,952	32,113,719			
	4 DEFINITELY TRUE	2,790	29,583,681			
	TOTAL	23,767	263,515,813			
<u>NTHELTHY</u>	<u>LESS HLTHY THAN SAMEAGE CHDRN (0-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>112</u>	<u>113</u>	<u>HE55_02</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	8	79,252			
	-7 REFUSED	5	3,244			
	-1 INAPPLICABLE	17,241	193,949,029			
	1 DEFINITELY FALSE	4,060	44,789,609			
	2 MOSTLY FALSE	1,844	18,633,718			
	3 MOSTLY TRUE	425	4,261,245			
	4 DEFINITELY TRUE	184	1,799,716			
	TOTAL	23,767	263,515,813			
<u>GETSICK</u>	<u>CHILD CATCH THINGS GOING ARND (0-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>114</u>	<u>115</u>	<u>HE55_03</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	7	69,301			
	-7 REFUSED	5	3,244			
	-1 INAPPLICABLE	17,241	193,949,029			
	1 DEFINITELY FALSE	2,184	22,426,147			
	2 MOSTLY FALSE	2,635	29,238,854			
	3 MOSTLY TRUE	1,255	13,527,805			
	4 DEFINITELY TRUE	440	4,301,432			
	TOTAL	23,767	263,515,813			
<u>HEIGHTFT</u>	<u>CHILD'S HEIGHT-FEET (0-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>116</u>	<u>117</u>	<u>HE56_01</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	712	5,836,706			
	-7 REFUSED	3	5,333			
	-1 INAPPLICABLE	17,241	193,949,029			
	0	28	282,143			
	1-7	5,783	63,442,601			
	TOTAL	23,767	263,515,813			

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<u>HEIGHTIN</u>	<u>CHILD'S HEIGHT-INCHES (0-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>118</u>	<u>119</u>	<u>HE56_02</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	92	804,669			
	-1 INAPPLICABLE	17,954	199,770,183			
	0	1,071	11,429,427			
	1-30	4,650	51,511,533			
	TOTAL	23,767	263,515,813			
<u>WEIGHTLB</u>	<u>CHILD'S WEIGHT-POUNDS (0-17 YRS)</u>	<u>3.0</u>	<u>NUM</u>	<u>120</u>	<u>122</u>	<u>HE57_01</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	402	3,420,487			
	-7 REFUSED	3	5,333			
	-1 INAPPLICABLE	17,241	193,949,029			
	0-300	6,121	66,140,963			
	TOTAL	23,767	263,515,813			
<u>WEIGHTOZ</u>	<u>CHILD'S WEIGHT-OUNCES (0-17 YRS)</u>	<u>2.0</u>	<u>NUM</u>	<u>123</u>	<u>124</u>	<u>HE57_02</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	270	2,594,801			
	-1 INAPPLICABLE	17,646	197,374,850			
	0	5,626	61,146,310			
	1-15	225	2,399,852			
	TOTAL	23,767	263,515,813			
<u>ACCELIG</u>	<u>IS PERS ELIGIBLE FOR ACCESS SUPPLEMENT</u>	<u>1.0</u>	<u>NUM</u>	<u>125</u>	<u>125</u>	<u>ACCELIG</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	1 YES	23,570	262,654,184			
	2 NO	197	861,629			
	TOTAL	23,767	263,515,813			
<u>HAVEUSC</u>	<u>DOES PERSON HAVE A USC PROVIDER?</u>	<u>2.0</u>	<u>NUM</u>	<u>126</u>	<u>127</u>	<u>AC01</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	14	23,582			
	-8 DK	161	1,024,281			
	-7 REFUSED	39	96,296			
	-1 INAPPLICABLE	201	861,629			
	1 YES	18,680	215,422,413			
	2 NO	4,672	46,087,612			
	TOTAL	23,767	263,515,813			

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>YNOUSC</u>	<u>MAIN REASON PERS DOESN'T HAVE A USC</u>	<u>2.0</u>	<u>NUM</u>	<u>128</u>	<u>129</u>	<u>AC03</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	13	145,230			
	-7 REFUSED	2	17,456			
	-1 INAPPLICABLE	19,095	217,428,201			
	1 SELDOM OR NEVER SICK	3,145	30,583,095			
	2 RECENTLY MOVED TO AREA	242	2,255,790			
	3 DONT KNOW WHERE TO GO	48	463,060			
	4 USC IN AREA NOT AVAILABL	134	1,557,297			
	5 CANT FIND PROV SPEAK LAN	9	81,812			
	6 GOES DIFF PL FOR DIFF NE	117	1,164,720			
	7 JUST CHANGED INSUR PLANS	64	799,521			
	8 DONT USE DOCS/TREAT SELF	154	1,671,144			
	9 COST OF MEDICAL CARE	448	4,141,995			
	10 OTHER INSUR-RELATED REA	73	913,516			
	91 OTHER REASON	223	2,292,976			
	TOTAL	23,767	263,515,813			
<u>NOREAS04</u>	<u>OTH REAS NO USC: NO OTHER REASONS (AC04)</u>	<u>2.0</u>	<u>NUM</u>	<u>130</u>	<u>131</u>	<u>AC04</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	3,801	37,157,584			
	2 NO	856	8,767,342			
	TOTAL	23,767	263,515,813			
<u>SELDISICK</u>	<u>OTH REAS NO USC: SELDOM/NEVERSICK</u>	<u>2.0</u>	<u>NUM</u>	<u>132</u>	<u>133</u>	<u>AC04</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	241	2,722,920			
	2 NO	4,416	43,202,006			
	TOTAL	23,767	263,515,813			
<u>NEWAREA</u>	<u>OTH REAS NO USC: RECENTLY MOVED</u>	<u>2.0</u>	<u>NUM</u>	<u>134</u>	<u>135</u>	<u>AC04</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	84	799,739			
	2 NO	4,573	45,125,188			
	TOTAL	23,767	263,515,813			

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
DKWHRUSC	OTH REAS NO USC: DK WHERE TO GO	2.0	NUM	136	137	AC04
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	56	625,680			
	2 NO	4,601	45,299,246			
	TOTAL	23,767	263,515,813			
USCNOTAV	OTH REAS NO USC: USC NOT AVAILABLE	2.0	NUM	138	139	AC04
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	29	340,418			
	2 NO	4,628	45,584,508			
	TOTAL	23,767	263,515,813			
PERSLANG	OTH REAS NO USC: LANGUAGE	2.0	NUM	140	141	AC04
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	10	37,059			
	2 NO	4,647	45,887,867			
	TOTAL	23,767	263,515,813			
DIFFPLAC	OTH REAS NO USC: DIFFERENT PLACES	2.0	NUM	142	143	AC04
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	20	200,108			
	2 NO	4,637	45,724,818			
	TOTAL	23,767	263,515,813			
INSRPLAN	OTH REAS NO USC: JUST CHANGED INSUR	2.0	NUM	144	145	AC04
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	33	271,138			
	2 NO	4,624	45,653,788			
	TOTAL	23,767	263,515,813			

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
MYSELF	OTH REAS NO USC: NO DOCS/TREAT SELF	2.0	NUM	146	147	AC04
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	142	1,569,465			
	2 NO	4,515	44,355,461			
	TOTAL	23,767	263,515,813			
CARECOST	OTH REAS NO USC: COST OF MED CARE	2.0	NUM	148	149	AC04
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	241	2,312,318			
	2 NO	4,416	43,612,608			
	TOTAL	23,767	263,515,813			
OTHINSRE	OTH REAS NO USC: OTHER INSUR REASON	2.0	NUM	150	151	AC04
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	71	767,024			
	2 NO	4,586	45,157,902			
	TOTAL	23,767	263,515,813			
OTHREA04	OTH REAS NO USC: OTHER REASON (AC04)	2.0	NUM	152	153	AC04
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	19,110	217,590,887			
	1 YES	112	1,377,165			
	2 NO	4,545	44,547,762			
	TOTAL	23,767	263,515,813			
TYPEPLCE	USC TYPE OF PLACE	2.0	NUM	154	155	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	9	114,683			
	-8 DK	24	313,068			
	-1 INAPPLICABLE	11,121	117,795,171			
	1 HOSP CLINIC/OUTPUT DEPT	2,269	23,900,111			
	2 PRIV OFF IN HOSP	490	5,174,438			
	3 HOSP ER	116	1,212,566			
	4 NON-HOSP	9,738	115,005,776			
	TOTAL	23,767	263,515,813			

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>PROVTYPX</u>	<u>PROVIDER TYPE</u>	<u>2.0</u>	<u>NUM</u>	<u>156</u>	<u>157</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	3			44,924	
	-1 INAPPLICABLE	5,087			48,093,399	
	1 FACILITY	8,495			94,812,303	
	2 PERSON	6,034			69,701,772	
	3 PERSON IN FACILITY PROV	4,148			50,863,414	
	TOTAL	23,767			263,515,813	
<u>YGOTOUSC</u>	<u>MAIN REASON PERS GOES TO HOSP USC</u>	<u>2.0</u>	<u>NUM</u>	<u>158</u>	<u>159</u>	AC08
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	4			6,881	
	-1 INAPPLICABLE	21,382			238,403,136	
	1 PREFERS/LIKES THIS USC	829			8,233,607	
	2 DK WHERE ELSE TO GO	47			551,040	
	3 CANT AFFORD GO ELSEWHERE	252			2,270,928	
	4 OWN DOC HAS OFFICE HERE	332			3,672,678	
	5 ONLY CARE AVAIL WHEN TIM	20			224,955	
	6 CONVENIENCE	345			3,821,973	
	7 BEST FOR MY CONDITION	171			1,920,971	
	10 INSURANCE RELATED REASO	202			2,456,712	
	91 OTHER REASON	183			1,952,932	
	TOTAL	23,767			263,515,813	
<u>NOREAS09</u>	<u>OTH REAS GO TO USC:NO OTH REASONS (AC09)</u>	<u>2.0</u>	<u>NUM</u>	<u>160</u>	<u>161</u>	AC09
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	21,386			238,410,018	
	1 YES	1,661			17,123,279	
	2 NO	720			7,982,516	
	TOTAL	23,767			263,515,813	
<u>LIKESUSC</u>	<u>OTH REAS GO TO USC: PREFRS/LIKES USC</u>	<u>2.0</u>	<u>NUM</u>	<u>162</u>	<u>163</u>	AC09
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	21,386			238,410,018	
	1 YES	157			1,760,809	
	2 NO	2,224			23,344,986	
	TOTAL	23,767			263,515,813	

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>DKELSEWH</u>	<u>OTH REAS GO TO USC: DK WH ELSE TO GO</u>	<u>2.0</u>	<u>NUM</u>	<u>164</u>	<u>165</u>	<u>AC09</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	21,386	238,410,018			
	1 YES	26	228,909			
	2 NO	2,355	24,876,886			
	TOTAL	23,767	263,515,813			
<u>AFFORD</u>	<u>OTH REAS GO TO USC: CAN'T AFFRD ELSEW</u>	<u>2.0</u>	<u>NUM</u>	<u>166</u>	<u>167</u>	<u>AC09</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	21,386	238,410,018			
	1 YES	93	1,006,315			
	2 NO	2,288	24,099,481			
	TOTAL	23,767	263,515,813			
<u>OFFICE</u>	<u>OTH REAS GO TO USC: DR OFFICE AT OPD</u>	<u>2.0</u>	<u>NUM</u>	<u>168</u>	<u>169</u>	<u>AC09</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	21,386	238,410,018			
	1 YES	123	1,493,707			
	2 NO	2,258	23,612,089			
	TOTAL	23,767	263,515,813			
<u>AVAILTIM</u>	<u>OTH REAS GO TO USC: AVAIL WHEN TIME</u>	<u>2.0</u>	<u>NUM</u>	<u>170</u>	<u>171</u>	<u>AC09</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	21,386	238,410,018			
	1 YES	31	326,563			
	2 NO	2,350	24,779,232			
	TOTAL	23,767	263,515,813			
<u>CONVENIE</u>	<u>OTH REAS GO TO USC: CONVENIENCE</u>	<u>2.0</u>	<u>NUM</u>	<u>172</u>	<u>173</u>	<u>AC09</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	21,386	238,410,018			
	1 YES	208	2,241,503			
	2 NO	2,173	22,864,292			
	TOTAL	23,767	263,515,813			

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<u>BSTPLACE</u>	<u>OTH REAS GO TO USC: BEST FOR COND</u>	<u>2.0</u>	<u>NUM</u>	<u>174</u>	<u>175</u>	<u>AC09</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	21,386	238,410,018			
	1 YES	144	1,612,679			
	2 NO	2,237	23,493,116			
	TOTAL	23,767	263,515,813			
<u>INSREASN</u>	<u>OTH REAS GO TO USC: INSUR-RELATED</u>	<u>2.0</u>	<u>NUM</u>	<u>176</u>	<u>177</u>	<u>AC09</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	21,386	238,410,018			
	1 YES	70	696,911			
	2 NO	2,311	24,408,884			
	TOTAL	23,767	263,515,813			
<u>OTHREA09</u>	<u>OTH REAS GO TO USC: OTHER REASON (AC09)</u>	<u>2.0</u>	<u>NUM</u>	<u>178</u>	<u>179</u>	<u>AC09</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	21,386	238,410,018			
	1 YES	68	812,419			
	2 NO	2,313	24,293,376			
	TOTAL	23,767	263,515,813			
<u>GETTOUSC</u>	<u>HOW DOES PERSN GET TO USC PROVIDER</u>	<u>2.0</u>	<u>NUM</u>	<u>180</u>	<u>181</u>	<u>AC09A</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	3	44,924			
	-8 DK	3	49,729			
	-7 REFUSED	1	5,781			
	-1 INAPPLICABLE	5,087	48,093,399			
	1 DRIVE/IS DRIVEN	17,254	202,152,623			
	2 TAXI,BUS,TRAIN,OTHER PUB	877	8,061,549			
	3 WALKS	540	5,070,763			
	91 OTHER WAY	2	37,044			
	TOTAL	23,767	263,515,813			

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<u>TYPEPERS</u>	<u>USC TYPE OF PROVIDER</u>	<u>2.0</u>	<u>NUM</u>	<u>182</u>	<u>183</u>	CONSTRUCTED
	<u>VALUE</u>		<u>UNWEIGHTED</u>		<u>WEIGHTED BY WGTSP2T</u>	
	-9 NOT ASCERTAINED		3		44,924	
	-1 INAPPLICABLE		13,582		142,905,702	
	1 MD-GEN/FAM PRACTICE		6,364		74,614,437	
	2 MD-INTERNAL MEDICINE		1,516		19,688,733	
	3 MD-PEDIATRICS		1,550		16,948,175	
	4 MD-OB/GYN		219		2,544,573	
	5 MD-SURGERY		52		725,289	
	6 MD-OTHER		416		5,187,332	
	7 CHIROPRACTOR		19		291,045	
	8 NURSE/NURSE PRACTNR		12		176,592	
	9 PHYSICIAN'S ASST		8		79,211	
	10 OTHER NON-MD PROVIDR		17		228,202	
	11 UNKNOWN		9		81,597	
	TOTAL		23,767		263,515,813	
<u>LOCATION</u>	<u>USC LOCATION</u>	<u>2.0</u>	<u>NUM</u>	<u>184</u>	<u>185</u>	CONSTRUCTED
	<u>VALUE</u>		<u>UNWEIGHTED</u>		<u>WEIGHTED BY WGTSP2T</u>	
	-9 NOT ASCERTAINED		9		114,683	
	-8 DK		24		313,068	
	-1 INAPPLICABLE		5,087		48,093,399	
	1 OFFICE		16,262		189,881,986	
	2 HOSP, NOT ER		2,269		23,900,111	
	3 HOSP, ER		116		1,212,566	
	TOTAL		23,767		263,515,813	
<u>MINORPRE</u>	<u>GO TO USC FOR NEW HEALTH PROBLEMS</u>	<u>2.0</u>	<u>NUM</u>	<u>186</u>	<u>187</u>	AC14
	<u>VALUE</u>		<u>UNWEIGHTED</u>		<u>WEIGHTED BY WGTSP2T</u>	
	-9 NOT ASCERTAINED		3		44,924	
	-8 DK		66		625,475	
	-7 REFUSED		1		14,439	
	-1 INAPPLICABLE		5,087		48,093,399	
	1 YES		18,112		209,043,428	
	2 NO		498		5,694,147	
	TOTAL		23,767		263,515,813	

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<u>PREVENTC</u>	<u>GO TO USC FOR PREVENTIVE HLTH CARE</u>	<u>2.0</u>	<u>NUM</u>	<u>188</u>	<u>189</u>	<u>AC14</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	3	44,924			
	-8 DK	51	428,374			
	-7 REFUSED	1	14,439			
	-1 INAPPLICABLE	5,087	48,093,399			
	1 YES	17,937	206,723,238			
	2 NO	688	8,211,438			
	TOTAL	23,767	263,515,813			
<u>REFFRLS</u>	<u>GO TO USC FOR REFERRALS</u>	<u>2.0</u>	<u>NUM</u>	<u>190</u>	<u>191</u>	<u>AC14</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	3	44,924			
	-8 DK	83	757,064			
	-7 REFUSED	1	14,439			
	-1 INAPPLICABLE	5,087	48,093,399			
	1 YES	17,919	206,580,737			
	2 NO	674	8,025,250			
	TOTAL	23,767	263,515,813			
<u>OFFHOURS</u>	<u>USC HAS OFFICE HRS NIGHTS/WEEKENDS</u>	<u>2.0</u>	<u>NUM</u>	<u>192</u>	<u>193</u>	<u>AC15</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	3	44,924			
	-8 DK	1,347	16,417,998			
	-7 REFUSED	4	51,312			
	-1 INAPPLICABLE	5,203	49,305,965			
	1 YES	8,365	96,232,039			
	2 NO	8,845	101,463,575			
	TOTAL	23,767	263,515,813			
<u>APPTWLK</u>	<u>WHEN SEE USC, HAVE APPT OR WALK IN</u>	<u>2.0</u>	<u>NUM</u>	<u>194</u>	<u>195</u>	<u>AC16</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	3	44,924			
	-8 DK	63	639,974			
	-7 REFUSED	1	14,439			
	-1 INAPPLICABLE	5,203	49,305,965			
	1 HAVE APPOINTMENT	13,623	162,813,847			
	2 JUST WALKS IN	1,426	14,508,391			
	3 SOMETIMES APPOINTM, SOMET	3,448	36,188,273			
	TOTAL	23,767	263,515,813			

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FILE 2: 1996 PANEL ROUND 2 HEALTH STATUS AND ACCESS TO CARE DATA
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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>APPDIFFC</u>	<u>HOW DIFFICULT TO GET APPT WITH USC</u>	<u>2.0</u>	<u>NUM</u>	<u>196</u>	<u>197</u>	<u>AC17</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	1	12,303			
	-8 DK	430	5,428,256			
	-7 REFUSED	1	14,275			
	-1 INAPPLICABLE	6,696	64,513,693			
	1 VERY DIFFICULT	1,412	15,980,927			
	2 SOMEWHAT DIFFICULT	2,422	27,545,941			
	3 NOT TOO DIFFICULT	5,577	65,083,476			
	4 NOT AT ALL DIFFICULT	7,228	84,936,942			
	TOTAL	23,767	263,515,813			
<u>WAITTIME</u>	<u>WITH APPT, HOW LONG TIL SEEN BY USC</u>	<u>2.0</u>	<u>NUM</u>	<u>198</u>	<u>199</u>	<u>AC18</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	1	12,303			
	-8 DK	319	3,837,553			
	-7 REFUSED	4	51,934			
	-1 INAPPLICABLE	6,696	64,513,693			
	1 LESS THAN 5 MIN	956	11,726,119			
	2 5 TO 15 MINUTES	7,387	88,892,344			
	3 16 TO 30 MINUTES	5,212	61,662,060			
	4 31 TO 59 MINUTES	1,831	20,177,470			
	5 1 TO 2 HOURS	1,111	10,450,638			
	6 MORE THAN 2 HOURS	250	2,191,698			
	TOTAL	23,767	263,515,813			
<u>PHONEDIF</u>	<u>HOW DIFFICULT CONTACT USC BY PHONE</u>	<u>2.0</u>	<u>NUM</u>	<u>200</u>	<u>201</u>	<u>AC19</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	3	44,924			
	-8 DK	1,445	16,848,498			
	-7 REFUSED	6	75,833			
	-1 INAPPLICABLE	5,087	48,093,399			
	1 VERY DIFFICULT	1,577	17,598,535			
	2 SOMEWHAT DIFFICULT	2,470	28,628,835			
	3 NOT TOO DIFFICULT	6,053	70,326,690			
	4 NOT AT ALL DIFFICULT	7,126	81,899,098			
	TOTAL	23,767	263,515,813			

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FILE 2: 1996 PANEL ROUND 2 HEALTH STATUS AND ACCESS TO CARE DATA
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DATE: October 21, 1997

<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>PRLISTEN</u>	<u>DOES USC PROV LISTEN?</u>	<u>2.0</u>	<u>NUM</u>	<u>202</u>	<u>203</u>	<u>AC19A</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	3	44,924			
	-8 DK	400	4,613,072			
	-7 REFUSED	4	53,366			
	-1 INAPPLICABLE	5,087	48,093,399			
	1 YES	17,597	203,468,306			
	2 NO	676	7,242,746			
	TOTAL	23,767	263,515,813			
<u>TREATMNT</u>	<u>PROV ASK ABOUT OTHER TREATMENTS</u>	<u>2.0</u>	<u>NUM</u>	<u>204</u>	<u>205</u>	<u>AC19B</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	3	44,924			
	-8 DK	916	10,917,675			
	-7 REFUSED	7	89,184			
	-1 INAPPLICABLE	5,087	48,093,399			
	1 YES	13,918	158,223,498			
	2 NO	3,836	46,147,133			
	TOTAL	23,767	263,515,813			
<u>CONFIDNT</u>	<u>CONFIDENT IN USC PROV'S ABILITY?</u>	<u>2.0</u>	<u>NUM</u>	<u>206</u>	<u>207</u>	<u>AC19C</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	3	44,924			
	-8 DK	306	3,503,241			
	-7 REFUSED	2	28,714			
	-1 INAPPLICABLE	5,087	48,093,399			
	1 YES	17,623	203,176,374			
	2 NO	746	8,669,161			
	TOTAL	23,767	263,515,813			
<u>PROVSTAF</u>	<u>HOW SATISFIED WITH USC STAFF</u>	<u>2.0</u>	<u>NUM</u>	<u>208</u>	<u>209</u>	<u>AC19D</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	4	60,965			
	-8 DK	253	2,787,232			
	-7 REFUSED	2	28,714			
	-1 INAPPLICABLE	5,087	48,093,399			
	1 VERY SATISFIED	13,599	157,148,382			
	2 SOMEWHAT SATISFIED	3,951	45,697,669			
	3 NOT TOO SATISFIED	627	6,710,013			
	4 NOT AT ALL SATISFIED	244	2,989,439			
	TOTAL	23,767	263,515,813			

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>USCQUAL</u>	<u>SATISFIED WITH QUALITY OF CARE</u>	<u>2.0</u>	<u>NUM</u>	<u>210</u>	<u>211</u>	<u>AC19E</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	3	44,924			
	-8 DK	227	2,647,738			
	-7 REFUSED	2	28,714			
	-1 INAPPLICABLE	5,087	48,093,399			
	1 VERY SATISFIED	14,533	168,189,424			
	2 SOMEWHAT SATISFIED	3,331	38,357,580			
	3 NOT TOO SATISFIED	446	4,678,230			
	4 NOT AT ALL SATISFIED	138	1,475,804			
	TOTAL	23,767	263,515,813			
<u>CHNGUSC</u>	<u>HAS ANYONE CHANGED USC IN LAST YEAR</u>	<u>2.0</u>	<u>NUM</u>	<u>212</u>	<u>213</u>	<u>AC20</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	5	57,352			
	-8 DK	40	339,539			
	-7 REFUSED	3	42,812			
	-1 INAPPLICABLE	2,444	24,537,797			
	1 YES	2,390	27,483,633			
	2 NO	18,885	211,054,680			
	TOTAL	23,767	263,515,813			
<u>YCHNGUSC</u>	<u>WHY DID PERSON(S) CHANGE USC</u>	<u>2.0</u>	<u>NUM</u>	<u>214</u>	<u>215</u>	<u>AC21</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	2	15,675			
	-1 INAPPLICABLE	21,377	236,032,179			
	1 FAM/PERS CHNGD INS PLAN	389	4,894,317			
	2 INSUR PLAN CHNG DOCS	182	2,396,619			
	3 DISSATIS W/QUAL CARE	543	6,195,724			
	4 HEALTH CARE NEEDS CHNGD	117	1,195,823			
	5 TOO FAR AWAY	135	1,465,966			
	6 MOVED TO NEW AREA	331	3,443,120			
	7 OLD PROV NOT AVAIL	365	4,440,268			
	8 COST-RELATED REASON	40	420,202			
	9 OTHER INSUR-RELATED REAS	30	225,535			
	10 JOB RELATED REASON	5	50,618			
	11 NEW DOC REF/RECOM	23	209,046			
	12 OTH COMPLNT OLD DOC	71	781,993			
	13 TRANSPORTATION	9	43,615			
	91 OTHER REASON	148	1,705,114			
	TOTAL	23,767	263,515,813			

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>ANYUSC</u>	<u>HAS ANYONE HAD A USC IN LAST YEAR</u>	<u>2.0</u>	<u>NUM</u>	<u>216</u>	<u>217</u>	<u>AC22</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	6			37,472	
	-8 DK	9			97,826	
	-7 REFUSED	2			16,918	
	-1 INAPPLICABLE	21,559			240,341,408	
	1 YES	243			2,727,284	
	2 NO	1,948			20,294,905	
	TOTAL	23,767			263,515,813	
<u>YNOMORE</u>	<u>WHY DON'T THEY HAVE A USC ANYMORE?</u>	<u>2.0</u>	<u>NUM</u>	<u>218</u>	<u>219</u>	<u>AC23</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	2			22,562	
	-1 INAPPLICABLE	23,524			260,788,529	
	1 FAM/PERS CHNGD INSUR PLA	17			219,986	
	3 DISSATIS W/ QUAL CARE	13			164,272	
	5 TOO FAR AWAY	19			143,788	
	6 MOVED TO NEW AREA	81			888,076	
	7 OLD PROV NOT AVAIL	33			466,579	
	8 COST-RELATED REASON	15			72,978	
	9 SELDOM SICK/NO NEED	26			275,971	
	10 OTH INSUR-RELATED REASO	15			175,316	
	91 OTHER REASON	22			297,756	
	TOTAL	23,767			263,515,813	
<u>NOCARE</u>	<u>DID ANYONE GO WITHOUT HEALTH CARE</u>	<u>2.0</u>	<u>NUM</u>	<u>220</u>	<u>221</u>	<u>AC24</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	23			129,292	
	-8 DK	32			293,208	
	-7 REFUSED	8			108,901	
	-1 INAPPLICABLE	197			861,629	
	1 YES	1,853			17,663,443	
	2 NO	21,654			244,459,341	
	TOTAL	23,767			263,515,813	

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<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
HCNEEDS	SATISFIED FAMILY CAN GET CARE	2.0	NUM	222	223	AC24A
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	97	1,107,986			
	-7 REFUSED	11	142,516			
	-1 INAPPLICABLE	197	861,629			
	1 VERY SATISFIED	16,933	194,282,331			
	2 SOMEWHAT SATISFIED	4,575	47,739,294			
	3 NOT TOO SATISFIED	1,217	11,837,182			
	4 NOT AT ALL SATISFIED	737	7,544,876			
	TOTAL	23,767	263,515,813			
OBTAINHC	ANYONE HAVE DIFFICLTY OBTAIN CARE	2.0	NUM	224	225	AC25
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-9 NOT ASCERTAINED	23	129,292			
	-8 DK	46	510,969			
	-7 REFUSED	9	123,176			
	-1 INAPPLICABLE	197	861,629			
	1 YES	2,992	31,328,592			
	2 NO	20,500	230,562,157			
	TOTAL	23,767	263,515,813			
MAINPROB	MAIN REASON EXPERIENCED DIFFICULTY	2.0	NUM	226	227	AC25A
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-8 DK	1	6,551			
	-1 INAPPLICABLE	20,775	232,187,221			
	1 COULD NOT AFFORD CARE	1,831	18,469,847			
	2 INS CO WOULD NOT APPROVE	388	4,125,031			
	3 PRE-EXISTING CONDITION	33	443,127			
	4 INS CO REQUIRED REFERRL-	62	833,895			
	5 DOCTOR REFUSED FAMILY IN	89	839,944			
	6 MEDICAL CARE TOO FAR AWA	24	251,221			
	7 CAN NOT DRIVE/NO CAR/NO	102	991,906			
	8 TOO EXPENSIVE TO GET THE	10	116,795			
	10 DIFFERENT LANGUAGE	12	203,907			
	14 COULD NOT GET TIME OFF	110	1,233,176			
	15 DK WHERE TO GO TO GET C	7	88,859			
	16 WAS REFUSED SERVICES	66	728,081			
	18 DID NOT HAVE TIME OR TO	75	896,321			
	91 OTHER	182	2,099,931			
	TOTAL	23,767	263,515,813			

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<u>NOOTHPRB</u>	<u>DIFFICULTY: NO OTHER PROBLEMS</u>	<u>2.0</u>	<u>NUM</u>	<u>228</u>	<u>229</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	1,859	19,713,588			
	2 NO	1,132	11,608,453			
	TOTAL	23,767	263,515,813			
<u>NOAFFORD</u>	<u>DIFFICULTY: COULDN'T AFFORD CARE</u>	<u>2.0</u>	<u>NUM</u>	<u>230</u>	<u>231</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	183	1,677,399			
	2 NO	2,808	29,644,642			
	TOTAL	23,767	263,515,813			
<u>INSNOPAY</u>	<u>DIFFICULTY: INS COMPANY WON'T PAY</u>	<u>2.0</u>	<u>NUM</u>	<u>232</u>	<u>233</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	212	2,313,157			
	2 NO	2,779	29,008,884			
	TOTAL	23,767	263,515,813			
<u>PREEXCON</u>	<u>DIFFICULTY: PRE-EXISTING CONDITION</u>	<u>2.0</u>	<u>NUM</u>	<u>234</u>	<u>235</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	88	1,010,782			
	2 NO	2,903	30,311,259			
	TOTAL	23,767	263,515,813			
<u>INSRQREF</u>	<u>DIFFICULTY: INS REQUIRED REFERRAL</u>	<u>2.0</u>	<u>NUM</u>	<u>236</u>	<u>237</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	69	614,204			
	2 NO	2,922	30,707,837			
	TOTAL	23,767	263,515,813			

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<u>REFUSIN</u>	<u>DIFFICULTY: DR REFUSED INS PLAN</u>	<u>2.0</u>	<u>NUM</u>	<u>238</u>	<u>239</u>	AC26
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	59	684,771			
	2 NO	2,932	30,637,270			
	TOTAL	23,767	263,515,813			
<u>DISTANCE</u>	<u>DIFFICULTY: DISTANCE</u>	<u>2.0</u>	<u>NUM</u>	<u>240</u>	<u>241</u>	AC26
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	61	635,926			
	2 NO	2,930	30,686,115			
	TOTAL	23,767	263,515,813			
<u>PUBTRANS</u>	<u>DIFFICULTY: PUBLIC TRANSPORTATION</u>	<u>2.0</u>	<u>NUM</u>	<u>242</u>	<u>243</u>	AC26
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	142	1,139,743			
	2 NO	2,849	30,182,298			
	TOTAL	23,767	263,515,813			
<u>EXPENSIV</u>	<u>DIFFICULTY: TOO EXPEN TO GET THERE</u>	<u>2.0</u>	<u>NUM</u>	<u>244</u>	<u>245</u>	AC26
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	77	515,020			
	2 NO	2,914	30,807,021			
	TOTAL	23,767	263,515,813			
<u>HEARPROB</u>	<u>DIFFICULTY: HEARING IMPAIR/ LOSS</u>	<u>2.0</u>	<u>NUM</u>	<u>246</u>	<u>247</u>	AC26
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	9	65,649			
	2 NO	2,982	31,256,392			
	TOTAL	23,767	263,515,813			

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<u>LANGBARR</u>	<u>DIFFICULTY: LANGUAGE BARRIER</u>	<u>2.0</u>	<u>NUM</u>	<u>248</u>	<u>249</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	45	255,485			
	2 NO	2,946	31,066,556			
	TOTAL	23,767	263,515,813			
<u>INTOBLDG</u>	<u>DIFFICULTY: HARD TO GET INTO BLDG</u>	<u>2.0</u>	<u>NUM</u>	<u>250</u>	<u>251</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	10	47,819			
	2 NO	2,981	31,274,222			
	TOTAL	23,767	263,515,813			
<u>INSIDE</u>	<u>DIFFICULTY: HARD TO GET AROUND</u>	<u>2.0</u>	<u>NUM</u>	<u>252</u>	<u>253</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	5	60,865			
	2 NO	2,986	31,261,176			
	TOTAL	23,767	263,515,813			
<u>EQUIPMNT</u>	<u>DIFFICULTY: NO APPROPRIATE EQUIP</u>	<u>2.0</u>	<u>NUM</u>	<u>254</u>	<u>255</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	15	204,298			
	2 NO	2,976	31,117,743			
	TOTAL	23,767	263,515,813			
<u>OFFWORK</u>	<u>DIFFICULTY: COULDN'T GET TIME OFF</u>	<u>2.0</u>	<u>NUM</u>	<u>256</u>	<u>257</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	188	1,809,156			
	2 NO	2,803	29,512,885			
	TOTAL	23,767	263,515,813			

MEPS PUBLIC USE RELEASE HC-002
FILE 2: 1996 PANEL ROUND 2 HEALTH STATUS AND ACCESS TO CARE DATA
CODEBOOK

DATE: October 21, 1997

<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>DKWHEREGO</u>	<u>DIFFICULTY: DK WHERE TO GO</u>	<u>2.0</u>	<u>NUM</u>	<u>258</u>	<u>259</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	73	703,285			
	2 NO	2,918	30,618,755			
	TOTAL	23,767	263,515,813			
<u>REFUSERV</u>	<u>DIFFICULTY: WAS REFUSED SERVICES</u>	<u>2.0</u>	<u>NUM</u>	<u>260</u>	<u>261</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	72	742,499			
	2 NO	2,919	30,579,541			
	TOTAL	23,767	263,515,813			
<u>CHLDCARE</u>	<u>DIFFICULTY: COULDN'T GET CHILD CARE</u>	<u>2.0</u>	<u>NUM</u>	<u>262</u>	<u>263</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	40	281,151			
	2 NO	2,951	31,040,890			
	TOTAL	23,767	263,515,813			
<u>NOTIME</u>	<u>DIFFICULTY: NO TIME/TOOK TOO LONG</u>	<u>2.0</u>	<u>NUM</u>	<u>264</u>	<u>265</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	157	1,384,190			
	2 NO	2,834	29,937,851			
	TOTAL	23,767	263,515,813			
<u>OTHRPROB</u>	<u>DIFFICULTY: OTHER</u>	<u>2.0</u>	<u>NUM</u>	<u>266</u>	<u>267</u>	<u>AC26</u>
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	-1 INAPPLICABLE	20,776	232,193,772			
	1 YES	205	2,370,553			
	2 NO	2,786	28,951,488			
	TOTAL	23,767	263,515,813			

MEPS PUBLIC USE RELEASE HC-002
FILE 2: 1996 PANEL ROUND 2 HEALTH STATUS AND ACCESS TO CARE DATA
CODEBOOK

DATE: October 21, 1997

<u>NAME</u>	<u>DESCRIPTION</u>	<u>FORMAT</u>	<u>TYPE</u>	<u>START</u>	<u>END</u>	<u>QUESTION NUMBER</u>
<u>WGTRU2T</u>	<u>FAMILY LEVEL ROUND 2 WEIGHT</u>	<u>12.6</u>	<u>NUM</u>	<u>268</u>	<u>279</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	750.97 - 51616.31	23,767		263,515,813		
	TOTAL	23,767		263,515,813		
<u>WGTSP2T</u>	<u>PERSON ROUND 2 WEIGHT</u>	<u>12.6</u>	<u>NUM</u>	<u>280</u>	<u>291</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	0	1,618		0		
	904.54 - 57326.96	22,149		263,515,813		
	TOTAL	23,767		263,515,813		
<u>VARSTR2</u>	<u>VARIANCE ESTIMATION STRATUM - ROUND2</u>	<u>3.0</u>	<u>NUM</u>	<u>292</u>	<u>294</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	1 - 140	23,767		263,515,813		
	TOTAL	23,767		263,515,813		
<u>VARPSU2</u>	<u>VARIANCE ESTIMATION PSU - ROUND 2</u>	<u>2.0</u>	<u>NUM</u>	<u>295</u>	<u>296</u>	CONSTRUCTED
	<u>VALUE</u>	<u>UNWEIGHTED</u>	<u>WEIGHTED BY WGTSP2T</u>			
	1 - 45	23,767		263,515,813		
	TOTAL	23,767		263,515,813		

E. Crosswalk of Variables to Variable Source

SURVEY ADMINISTRATION VARIABLES - PUBLIC USE

VARIABLE	LABEL	SOURCE
DUID	Dwelling Unit ID	Assigned in sampling
PID	Person Number (PN)	Assigned in sampling or by CAPI
DUPERSID	Sample Person ID (DU + PN) for Public Use	Assigned in sampling
FAMID2	Family Identifier for Round 2	Assigned by CAPI
RND2REF	PID of Reference Person at Round 2	RE 6, 8
KEYNESS2	Person Key Status - Round 2	RE Section
ELIGRND2	Round 2 Eligibility	RE Section
INSCOPE2	Inscope Indicator - Round 2	RE Section
PSTATUS2	Person Disposition Status - Round 2	RE Section

MANAGED CARE VARIABLES - PUBLIC USE

VARIABLE	LABEL	SOURCE
PRVHMO1	PID Enrolled in Private HMO Plan	HX03,HX23, HX49_02.TYPE, HX51_02.TYPE, HX54_02.TYPE, MC01, MC02
MCRHMO1	PID Enrolled in Medicare HMO	HX31, HX32,HX32A
PUBHMO1	PID Enrolled in Public HMO	HX41, HX42, HX43

HEALTH STATUS VARIABLES - PUBLIC USE

VARIABLE	LABEL	SOURCE
IADLHLP2	LTC Flag: IADL Help/Supervision - Round 2	HE 01-03
ADLHELP2	LTC Flag: ADL Help/Supervision - Round 2	HE 04-06
LIMTACT	Limited in Any Activities (=< 4 years)	HE 40-41

ACCESS TO CARE VARIABLES - PUBLIC USE

VARIABLE	LABEL	SOURCE
TYPEPLCE	USC Type Of Place	AC06,AC07
PROVTYPX	Provider Type	PV01, PV03, PV05, PV10
TYPEPERS	USC Type Of Provider	AC10, AC11, AC110V, AC12, AC120V
LOCATION	USC Location	PROVTYPX, TYPEPLCE

WEIGHTS AND VARIANCE ESTIMATION VARIABLES - PUBLIC USE

VARIABLE	LABEL	SOURCE
WGTSPI	Person Round 1 Weight	Constructed
WGTSPT	Person Round 2 Weight	Constructed
WGTRU1	Family Level Round 1 Weight	Constructed
WGTRU2	Family Level Round 2 Weight	Constructed
VARSTR1	Variance Estimation Stratum - Round 1	Constructed
VARPSU1	Variance Estimation PSU - Round 1	Constructed
VARSTR2	Variance Estimation Stratum - Round 2	Constructed
VARPSU2	Variance Estimation PSU - Round 2	Constructed

F. Catalog of Medical Expenditure Panel Survey Products as of 10/31/97

Catalog of Medical Expenditure Panel Survey Products as of 10/31/97

All of the products listed below are available free of charge by calling the Agency for Health Care Policy and Research Publications Clearinghouse at 1-800-358-9295. Unless otherwise indicated, products are also available in the MEPS section of the AHCPR Web site, <http://www.ahcpr.gov>. Note that HC refers to the Household Component of MEPS, and NHC refers to the Nursing Home Component; descriptions of the MEPS components can be found in all of the Methodology Reports and Research Findings listed below.

Data Products

MEPS-HC Round 1 Questionnaire. Diskette. AHCPR Pub. No. 97-DP02.

MEPS-NHC Round 1 Questionnaire. Diskette. AHCPR Pub. No. 97-DP03.

MEPS HC-001: 1996 Panel Round 1 Population Characteristics, March 1997. CD-ROM only. AHCPR Pub. No. 97-DP20.

MEPS NHC-001: Round 1 Sampled Facility and Person Characteristics, March 1997. CD-ROM only. AHCPR Pub. No. 97-DP21.

MEPS HC-002: 1996 Panel Round 1 Parent Identifiers and HMO Data / Round 2 Health Status and Access to Care Data, October 1997. Diskette. AHCPR Pub. No. 98-DP01.

Print Products

Methodology Reports

Cohen J. Design and methods of the Medical Expenditure Panel Survey Household Component. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Methodology Report No. 1*. AHCPR Pub. No. 97-0026.

Cohen S. Sample design of the 1996 Medical Expenditure Panel Survey Household Component. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Methodology Report No. 2*. AHCPR Pub. No. 97-0027.

Research Findings

Vistnes JP, Monheit AC. Health insurance status of the civilian noninstitutionalized population: 1996. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Research Findings No. 1*. AHCPR Pub. No. 97-0030.

Monheit AC, Vistnes JP. Health insurance status of workers and their families: 1996. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Research Findings No. 2*. AHCPR Pub. No. 97-0065.

Weinick RM, Zuvekas SH, Drilea SK. Access to health care--sources and barriers, 1996. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Research Findings No. 3*. AHCPR Pub. No. 98-0001.

Highlights

Beauregard KM, Drilea SK, Vistnes JP. The uninsured in America--1996. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Highlights No. 1*. AHCPR Pub. No. 97-0025.

Krauss NA, Freiman MP, Rhoades JA, et al. Nursing home update--1996. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Highlights No. 2*. AHCPR Pub. No. 97-0036.

Agency for Health Care Policy and Research. Access to health care in America--1996. Rockville (MD); 1997. *MEPS Highlights No. 3*. AHCPR Pub. No. 98-0002.

Chartbooks

Weigers ME, Weinick RM, Cohen JW. Children's health, 1996: health insurance, access to care, and health status. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Chartbook No. 1*. AHCPR Pub. No. 98-0008. Forthcoming.

Journal Articles (available only through the AHCPR Publications Clearinghouse)

Cohen, JW, Monheit AC, Beauregard KM, et al. The Medical Expenditure Panel Survey: a national health information resources. *Inquiry* 1996;33:373-389. AHCPR Pub. No. 97-R043.